



U.S. Department of Transportation

National Highway Traffic Safety Administration

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*** *** ***



DYNAMIC SCIENCE, INC. In-Depth Accident Investigation

Contract DTNH22-94-D-27058 Case DSI-95-AB-17

1996

	1		recnnical Report Documentation Page		
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16. Abstract					
Vehicle 1, a 1994 Plymouth Gr at a speed estimated as 111 kr	and Voyager, was being driven ea n/h (69 MPH). In addition to the c	ast on a two-lane, undivided driver, there was one other a	roadway in the early morning hours of a summer weekend dult and four children occupying this vehicle.		
Vehicle 2, a 1983 Buick LeSab vehicle.	re, was being driven west at a spe	eed estimated to be 89 km/h	(55 MPH). The driver was the only occupant of this		
Vehicle 2 crossed the centerline and struck Vehicle 1 head-on. At impact, both the driver and passenger side airbags deployed in Vehicle 1 rotated approximately 80 degrees clockwise, departed the roadway, and came to rest facing north. Vehicle 1 was pushed backwards in a clockwise direction and came to rest on the roadway facing southeast.					
Five occupants in Vehicle 1 sustained injuries and were transported from the scene. The driver sustained a right femur fracture, right and left wrist fractures, and a possible hip fracture. The right front occupant, a six year old male, sustained numerous serious injuries including a skull fracture, an atlanto-occipital dislocation, and heart contusions. He died as a result of his injuries. The four year old female in the left side of the second seat had no apparent injuries, while the one year old male child in the right side of the second seat sustained a skull fracture. The third seat seat occupants, an eight year old female and a 35 year old female, sustained some musculoskeletal and lower leg injuries, respectively.					
The driver of Vehicle 2 was injured, but to what extent is not known at this time.					
Both vehicles were towed from the scene due to damage sustained in this accident. Vehicle 1 has since been "totaled out", partially dismantled, and sold to a wrecking yard.					
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TECHNICAL SUMMARY

CONTRACTOR: CONTRACT NUMBER: Dynamic Science, Inc. DTNH22-94-D-27058

CASE NUMBER:

Case DSI-95-AB-17

Vehicle 1, a 1994 Plymouth Grand Voyager, was being driven east on a two-lane, undivided roadway in the early morning hours of a summer weekend at a speed estimated as 111 km/h (69 MPH). In addition to the driver, there was one other adult and four children occupying this vehicle.

Vehicle 2, a 1983 Buick LeSabre, was being driven west at a speed estimated to be 89 km/h (55 MPH). The driver was the only occupant of this vehicle.

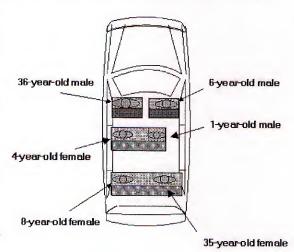
Vehicle 2 crossed the centerline and struck Vehicle 1 head-on. At impact, both the driver and passenger side airbags deployed in Vehicle 1. Vehicle 2 rotated approximately 80 degrees clockwise, departed the roadway, and came to rest facing north. Vehicle 1 was pushed backwards in a clockwise direction and came to rest on the roadway facing southeast.

Five occupants in Vehicle 1 sustained injuries and were transported from the scene. The driver sustained a right femur fracture, right and left wrist fractures, and a possible hip fracture. The right front occupant, a six year old

male, sustained numerous serious injuries including a skull fracture, an atlanto-occipital dislocation, and heart contusions. He died as a result of his injuries. The four year old female in the left side of the second seat had no apparent injuries, while the one year old male child in the right side of the second seat sustained a skull fracture. The third seat seat occupants, an eight year old female and a 35 year old female, sustained some musculoskeletal and lower leg injuries, respectively.

The driver of Vehicle 2 was injured, but to what extent is not known at this time.

Both vehicles were towed from the scene due to damage sustained in this accident. Vehicle 1 has since been "totaled out", partially dismantled, and sold to a wrecking yard.



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The crash investigation process is an inexact science which requires that physical evidence such as skid marks, vehicular damage measurements, and occupant contact points be coupled with the investigator's expert knowledge and experience of vehicle dynamics and occupant kinematics in order to determine the pre-crash, crash, and post-crash movements of involved vehicles and occupants.

Because each crash is a unique sequence of events, generalized conclusions cannot be made concerning the crashworthiness performance of the involved vehicle(s) or their safety systems.

DYNAMIC SCIENCE, INC. ACCIDENT INVESTIGATION CASE NUMBER: DSI-95-AB-17

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ACCIDENT DATA:	
Location:	
Area/Type:	Rural
Date/Time:	Summer/morning
Accident Type:	Head-on
Injury Severity:	
Vehicle 1:	Driver: AIS-2 R/F Occupant: AIS-3 R/R Occupant: AIS-2 Third seat Occupant: Injured, unknown severity Third seat Occupant: Injured, unknown severity
Vehicle 2:	Driver: Reportedly sustained non-incapacitating injuries of unknown severity
AMBIENCE:	
Viewing Conditions:	Good
Cloud Cover:	Unknown
Precipitation:	None
Temperature:	11 ° C (52° F)
Road Surface:	Dry

ROADWAY:

VEHICLE 1 VEHICLE 2

Type: Two-lane, undivided Two-lane, undivided

Width: 7.5 M (24.5 ft.) 7.5 M (24.5 ft.)

Traffic Density: Light Light

Median: None None

Edge: Asphalt paved shoulder Asphalt paved shoulder

Surface: Bituminous Bituminous

Reported Defects: None None

Co-efficient of Friction (est.): 0.70 0.70

Vertical Alignment: Level Level

Horizontal Alignment: Straight Straight

Traffic Controls:

VEHICLE 1

VEHICLE 2

Signals:

None

None

Signs:

None

None

Speed Limit:

89 KPH (55 MPH)

89 KPH (55 MPH)

Markings:

Dashed yellow lines separate EB/WB travel lanes. Single, solid, white painted line separates east shoulder and EB travel lane. Dashed yellow lines separate EB/WB travel lanes. Single, solid, white painted line separates west shoulder and WB travel lane.

VEHICLES:

VEHICLE 1 VEHICLE 2

Description: 1994 Plymouth Voyager 1983 Buick LeSabre

Odometer: 15214 km (9456 miles) 88572 km (55048 miles)

Engine: 3.3 L MPI 5.0L V8 4BBL

Vehicle Modifications: None None

Tire Condition: New. LF/43 PSI, New, RR/27 PSI, RF, LF,

RF/flat due to damage. LR flat due to damage.

RR/45 PSI, LR/43 PSI

Manual Restraints: Lap and shoulder Lap and shoulder

Automatic Restraints:NoneNoneReported Defects:NoneNone

Cargo: Unknown Unknown

Windshield Damage: Cracked and holed Cracked and dislodged

Fleet: NA NA

Tow Status: Towed due to damage Towed due to damage

4

VEHICLE DAMAGE:

VEHICLE 1 VEHICLE 2

Object Struck: Vehicle 2 Vehicle 1

Event Number: 01

CDC: 12FZEW7 12FDEW6

Maximum Crush: 137 cm (54 inches) 170 cm (27 inches)

VEHICLE VELOCITY ESTIMATES:

	VEHICLE 1	VEHICLE 2
Impact Speed: (estimated)	Unknown impact speed. Estimated travel speed 111.5 KPH (69.3 MPH)	Unknown
Total Delta Vehicle:	84.4 KPH (52.5 MPH)	90.5 KPH (56.2 MPH)
Longitudinal Delta Vehicle:	-84.1 KPH (-52.3 MPH)	-89.1 KPH (-55.4 MPH)
Lateral Delta Vehicle:	+7.4 KPH (4.6 MPH)	-15.7 KPH (-9.8 MPH)
Energy Dissipation:	757405.3 NT-M (558558.5 FT-LB)	360010.6 NT-M (265494.6 FT-LB)

The delta Vs were calculated using CRASH III with the following adjustments: the D values were interpreted from photos and exemplar vehicles, CRASH L represents undeformed end width, the crush profiles were obtained from the police report (they were compared photographically and appear to be reasonable), and the occupant weights were obtained as estimates from the NASS Coding and Editing Manual.

Vehicle 1 pre-crash skid

$$S_1 = \sqrt{30*d*f}$$
where S_1 = skid speed, d =skid distance =97.7 ft.
$$f = drag \ factor = 0.7,$$

$$S_1 = \sqrt{30*97.7*.7} = 45.3 \ MPH = 72.8 \ KPH$$

Calculate travel speed using velocity change as the impact speed.

$$S_1 = \sqrt{S_s^2 + S_i^2}$$
where S_s = speed at start of skid, S_i = impact speed
$$S_1 = \sqrt{45.3^2 + 52.5^2} = 69.3 \text{ MPH} = 111.5 \text{ KPH}$$

COLLISION SEQUENCE:

Pre-Crash:

This two vehicle crash occurred during the morning hours of a summer weekend on a two-lane, undivided, asphalt paved, rural roadway in

The weather was clear and the roadway dry.

Vehicle 1, a rented 1994 Plymouth Grand Voyager, was being driven east by a 36-year old male at a speed estimated to be 111 km/h (69 MPH). In addition to the driver, there was one other adult and four children occupying this vehicle.

Vehicle 2, a 1983 Buick LeSabre, was being driven west at a speed estimated to be 89 kph (55 MPH). A post-crash inspection found that the cruise control on this vehicle was in the "ON" position. The driver was the only occupant of this vehicle. Police investigators indicated that driver fatigue was a contributing factor.

Crash:

Vehicle 2 crossed the centerline. The driver of Vehicle 1 apparently saw Vehicle 2 and began braking, leaving 29.5 M (97 ft) of locked skids, and steered to the right. Vehicle 2 entered the path of Vehicle 1 and impacted it head-on. At impact, both the driver and passenger side airbags deployed in Vehicle 1. Vehicle 2 rotated approximately 80 degrees clockwise, departed the roadway, and came to rest facing north 13.3 M (43.8 ft) from the area of impact. Vehicle 1 was pushed backwards in a clockwise direction and came to rest on the roadway facing southeast.

Post Crash:

Five occupants in Vehicle 1 sustained injuries and were transported from the scene. The driver sustained a right femur fracture, right and left wrist fractures, and a possible hip fracture. The right front occupant, a six year old male, sustained a skull fracture, brain injuries, atlanto-occipital dislocation, and chest trauma; he died as a result of his injuries.

Shortly after the collision, the right front occupant stopped breathing twice. He was removed from the vehicle and CPR was applied. By the time the police had arrived, he was breathing on his own. The following lists events related to his transport and treatment.

a Life
6

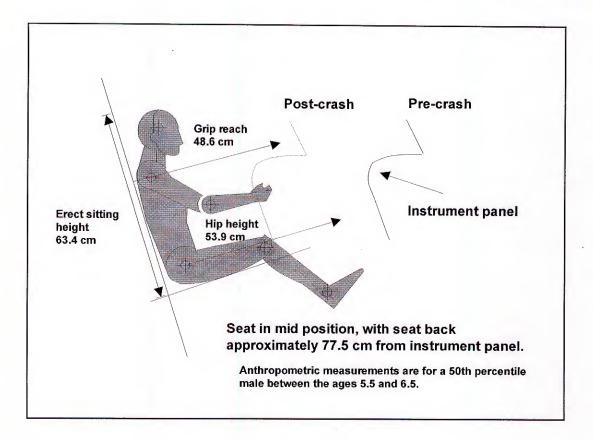
The four year old female in the left side of the second seat had no apparent injuries, while the one year old male child in the right side of the second seat sustained a skull fracture. The third seat seat occupants, an eight year old male, sustained a skull fracture. The rearmost seat occupants, an eight year old female and 35 year old female, sustained some musculoskeletal and lower leg injuries, respectively.

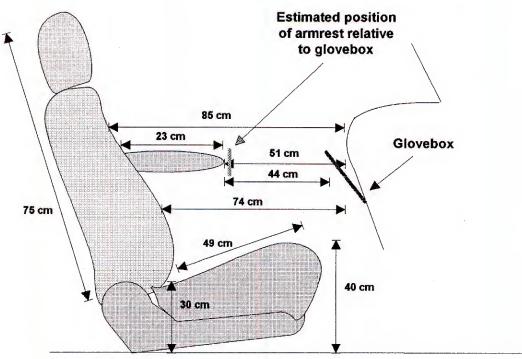
The driver of Vehicle 2 was injured, but to what extent is not known at this time.

Occupant Kinematics:

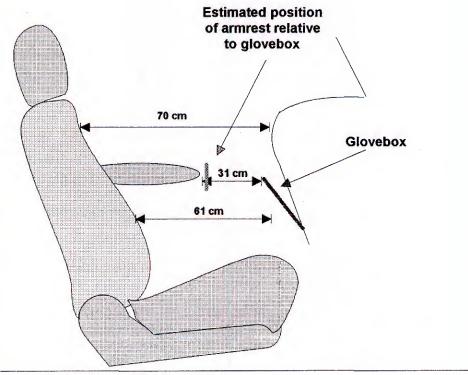
The 36-year-old male driver of Vehicle 1 was seated in a bucket seat in what would appear to be a normal, upright fashion. Prior to impact, the driver's right foot was presumably on the brake; both hands were on the steering wheel. The driver was wearing the available lap and shoulder belt. At impact, the driver would have been forced forward and slightly to the left. The airbag deployed upon impact and was loaded by the driver. There was some intrusion in this seat position and the driver was physically restricted.

The right front occupant, a six year old male, was seated in a bucket seat in an upright fashion. It appears, based on injury evidence and statements of practice, that this occupant was properly wearing the lap and shoulder belt. Prior to impact, this occupant would have loaded the restraint due to preimpact braking. There is clear indication that at impact, the airbag deployed and contacted this occupant's entire face. There are abrasions to the neck and abdomen which match up to lap and shoulder belt use. It appears that this occupant's left hand was extended and it struck the instrument panel, contusing the hand and fracturing the radius. This occupant sustained torn atlanto-occipital ligaments which the medical consultant attributes to excessive flexion of the neck. It appears likely that the head was turned as it was being forced rearward. There was considerable intrusion into this area and it appears that the glove compartment may have opened during the impact. This occupant's legs likely contacted these intruding components. The following diagram provides an overview of this occupant's dimensions relative to the preand post-crash dimensions of the case vehicle's interior.





Seat in rearwardmost position



Seat in forwardmost position

The second seat left occupant, a 4-year old female, was seated in a bench seat. She was wearing the lap and shoulder belt and the police indicated that she did not sustain any apparent injury.

The second seat right occupant, a 1-year-old male, was seated in an integral child safety seat. He sustained a skull fracture which appears to have come about as a result of contacting the rear of the RF seat.

The third seat positions were occupied by an 8-year-old female and a 35-year-old female. Both occupants were wearing their seatbelts. The 8-year-old complained of abdominal pain from the seatbelt and had some musculoskeletal injuries. The 35-year-old sustained an unknown injury to her left leg.

Airbag System:

Vehicle 1 was equipped with both a driver's airbag and passenger side airbag that deployed as a result of this head-on collision.

Scene Clearance:

Both vehicles were towed from the scene due to damage sustained in this accident. Vehicle 1 has since been "totaled out" and sold to a wrecking yard.

Safety Standards:

There were no violations of Federal Motor Vehicle Safety Standards and Regulations found during the inspection of the case vehicle.

DRIVER AND OTHER OCCUPANTS:

VEHICLE 1

DRIVER OCCUPANT 2

Age/Sex: 36/Male 6/Male

Seated Position: Left front Right front

Seat Type: Bucket Bucket

Height: Unknown Unknown

Weight: Unknown Unknown

Occupation: Unknown None

Pre-existing Medical Unknown None

Condition:

Alcohol/Drug Involvement: None None

Driving Experience: ≈20 year NA

Body Posture: Normal, upright Unknown

Hand Position: Both hands on wheel Unknown

Foot Position: Right foot on brake, left on Unknown

floorboard

Restraint Usage: Lap and shoulder used Lap and shoulder used

Additional Occupants: Five Four

¹Restraint used = "Yes", per police report

Occupant #4

Unknown

Two

Child seat harnesses used

DRIVER AND OTHER OCCUPANTS:

VEHICLE 1

Age/Sex: 4/Female 1/Male **Seated Position:** Left rear Right rear Bench with integral child Bench with integral child seat **Seat Type:** seat Unknown Unknown Height: Unknown Unknown Weight: Occupation: NA NA **Pre-existing Medical** Unknown Unknown Condition: Alcohol/Drug Involvement: None None NA NA **Driving Experience: Body Posture:** Unknown Unknown **Hand Position:** Unknown Unknown

Occupant #3

Unknown

unknown

Three

Restraint used, type

Foot Position:

Restraint Usage:²

Additional Occupants:

²Restraint used = "Yes", per police report

DRIVER AND OTHER OCCUPANTS:

VEHICLE 1

Occupant #6 Occupant # 5 Age/Sex: 35/Female 8/Female **Seated Position:** Third seat Third seat **Seat Type:** Bench Bench Height: Unknown Unknown Weight: Unknown Unknown **Occupation:** NA Unknown **Pre-existing Medical** Unknown Unknown **Condition: Alcohol/Drug Involvement:** None None **Driving Experience:** NA NA **Body Posture:** Unknown Unknown **Hand Position:** Unknown Unknown

Restraint Usage:³

Foot Position:

Lap and shoulder used

Lap and shoulder used

Additional Occupants:

One

Unknown

None

Unknown

³Restraint used = "Yes", per police report

DRIVER AND OTHER OCCUPANTS:

VEHICLE 2

DRIVER

Age/Sex: 25/Male

Seated Position: Left front

Seat Type: Bench

Height: Unknown

Weight: Unknown

Occupation: Unknown

Pre-existing Medical Unknown

Condition:

Alcohol Involvement: Yes

Driving Experience: Unknown

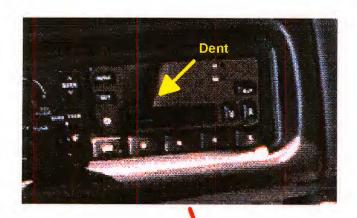
Body Posture: Unknown

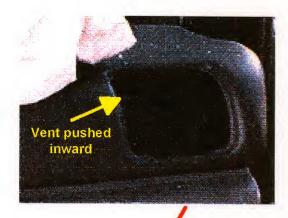
Hand Position: Unknown

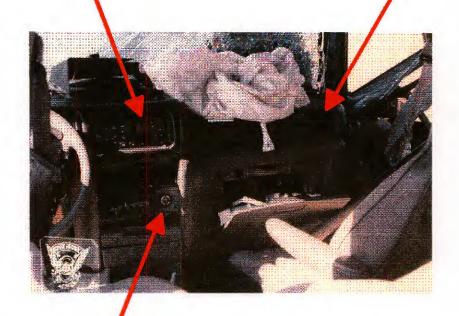
Foot Position: Unknown

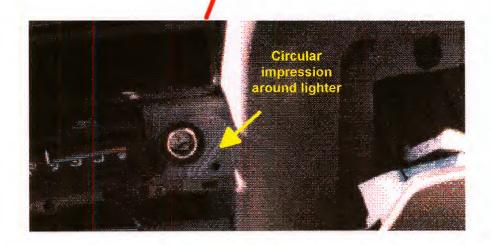
Restraint Usage: Lap and shoulder used

Additional Occupants: None









INJURIES:

Vehicle 1

	<u>INJURY</u>	OIC CODE	<u>ICD-9</u>	SOURCE / Confidence ⁴
Driver:	Right femur fracture	8518022,1	821.0	Brake/2
	Right wrist fracture	7518002,1	814.0	Steering wheel rim/2
	Left wrist fracture	7518002,2	814.0	Steering wheel rim/2
R/F Occupant:5	Cerebral edema	140454.3,6	348.5	Airbag/2
	Atlanto-occipital dislocation/laceration	650208.2,6	847.0	Airbag/2
	Brain contusion	140402.3,6	851.4	Airbag/2
	Subarachnoid hemorrhage	140466.3,6	852.0	Airbag/2
	Skull fracture, frontal bone	150402.2,5	800.2	Airbag/2
	Skull fracture, sphenoid	150200.3,2	801.2	Airbag/2
	Contusions, heart	441004.3,4	861.01	Unknown/9
	Radius fracture, left	752802.2,2	813.00	Instrument panel/2
	Abrasion, eyelid	297202.1,1	910.0	Airbag/1
	Contusion, ear	290402.1,1	920.0	Unknown/9
	Abrasion, cheek, 3.5 in.	290202.1,1	910.0	Airbag/1
	Abrasion, right side of neck, 3.0 in.	390202.1,1	910.0	Shoulder belt/2
	Contusion, right arm	790402.1,1	923.03	Instrument panel/2
	Punctate abrasion, right arm	790202.1,1	913.0	Airbag/2
	Contusion, right thigh	890402.1,1	924.0	Unknown/9

⁴1=Certain, 2=Probable, 3=Possible, 4=Unknown

⁵The combination of high speed, impact location, and intrusion made survival for this occupant unlikely, even with proper restraint use and the airbag deployment.

Punctate abrasions, right thigh	890202.1,1	916.0	Unknown/9
Subungual hematoma, right toe	890402.1,1	924.3	Instrument panel/2
Abrasion, left knee	890202.1,2	916.0	Instrument panel/2
Contusions, left thigh	890402.1,2	924.0	Instrument panel/2
Punctate abrasions, left thigh	890202.1,2	916.0	Instrument panel/2
Linear abrasion, right abdomen	590202.1,1	911.0	Seatbelt/2
Curved abrasion, right abdomen	590202.1,1	911.0	Seatbelt/2
Abrasion, right abdomen	590202.1,1	911.0	Airbag/3
Punctate abrasions, right abdomen	590202.1,1	911.0	Airbag/3
Contusions, right abdomen	590402.1,1	922.2	Unknown/9
Abrasion, chin	290202.1,8	910.0	Airbag/1
Abrasion, left check	290202.1,2	910.0	Airbag/1
Abrasion, nose	290202.1,4	910.0	Airbag/1
Contusion, left side	290402.1,2	920.0	Airbag/3
Contusions, forehead	290402.1,7	920.0	Airbag/2
Abrasion, forehead	290202.1,7	910.0	Airbag/1
Contusion, lower back	590402.1,8	922.3	Seat back/3
Linear abrasions, posterior left thigh	890202.1,2	916.0	Seat/3
Vertical linear abrasions, posterior right thigh	890202.1,1	916.0	Seat/3
Ecchymoses to left hand	790402.1,2	923.2	Instrument panel/2
Skull fracture	1500002,9	800.6	Seat back/9

Right rear, second seat

DSI-95-AB-17

Third seat (35 YO)	Left lower leg injury	8950997,2	916.8	Unknown/9	
Third seat (8 YO)	Musculoskeletal injuries	9550997,9	Unknown	Unknown/9	

INJURIES:

Vehicle 2

<u>INJURY</u> <u>OIC CODE</u> <u>ICD-9</u> <u>SOURCE</u>

Driver: Unknown

Abbreviations Used In Scene And Photographic Documentation

ft	Feet
in	Inches
AIS	Abbreviated Injury Scale
BLF	Begin Left Front
BLR	Begin Left Rear

BLR Begin Left Rear
BRF Begin Right Front
BRR Begin Right Rear
CBE Cab Behind Engine
CCW Counterclockwise

CDC Collision Deformation Classification

CG Center of Gravity

CM Centimeter

COE Cab Over Engine

CW Clockwise

East, Eastbound E, EB **ELF End Left Front** ELR End Left Rear **End Right Front ERF End Right Rear ERR Final Rest Position FRP** I Interstate Highway **Intermediate Point** IP

KG Kilogram

KPH Kilometers Per Hour

LF Left Front
LR Left Rear
M Meter

N, NB North, Northbound

NE Northeast NW Northwest

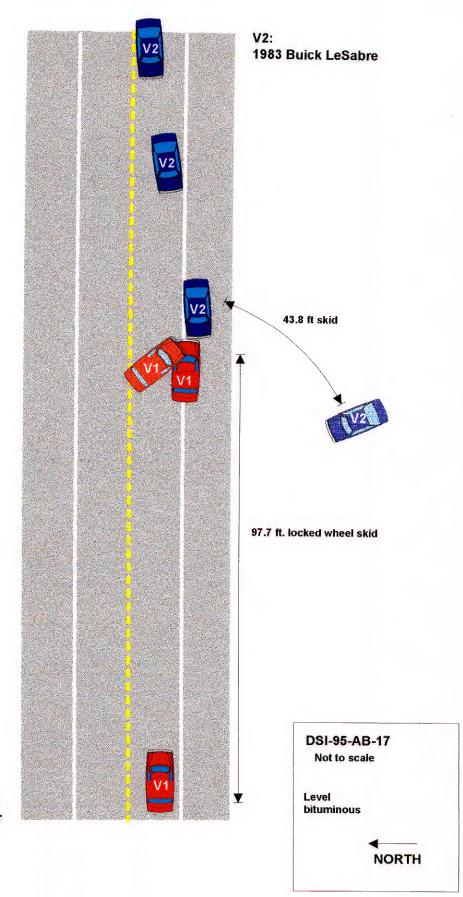
PDOF Principal Direction of Force

POI Point of Impact
RF Right Front
RL Reference Line
RP Reference Point
RR Right Rear

S, SB South, Southbound

T Time or Elapsed Time (in seconds)

U.S. United States Highway
V1 Vehicle Number 1
W, WB West, Westbound



V1: 1994 Plymouth Grand Voyager

SELECTED POLICE PHOTOS

Case No. DSI-95-AB-17

PHOTO NO.	VEHICL E NO.	DIRECTION OF PICTURE	SUBJECT MATTER
1	1	West	Final rest area. Note: the top of Vehicle 2 is visible on the left side of the photo.
2	1	West	Final rest area (closeup).
3	11	West	Impact area, shows locked wheel skids.
4	2	South	Final rest.
5-11	11	CW	Exterior.
12-19	1	NA	Interior. Note: #12 shows RF intrusion, #13 shows forward seat deformation for 2nd and 3rd seats, #14 shows convertible child seat.
20-29	2	CCW	Exterior.
30-31	2	NA	Interior.
		-	





DSI-95-AB-17-02 Police Photos





DSI-95-AB-17-04 Police Photos



DSI-95-AB-17-05 Police Photos



DSI-95-AB-17-06 Police Photos



DSI-95-AB-17-07 Police Photos

BESTAVAILABLE DSI-95-AB-17-08









DSI-95-AB-17-12 Police Photos









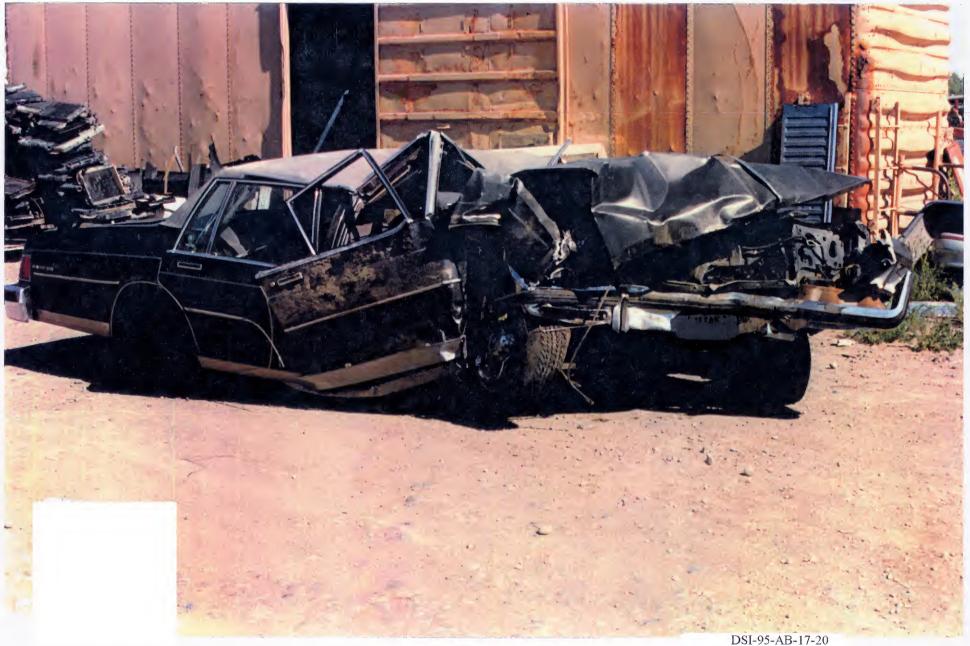
DSI-95-AB-17-16 Police Photos





DSI-95-AB-17-18 Police Photos





DSI-95-AB-17-20 Police Photos









DSI-95-AB-17-24 Police Photos





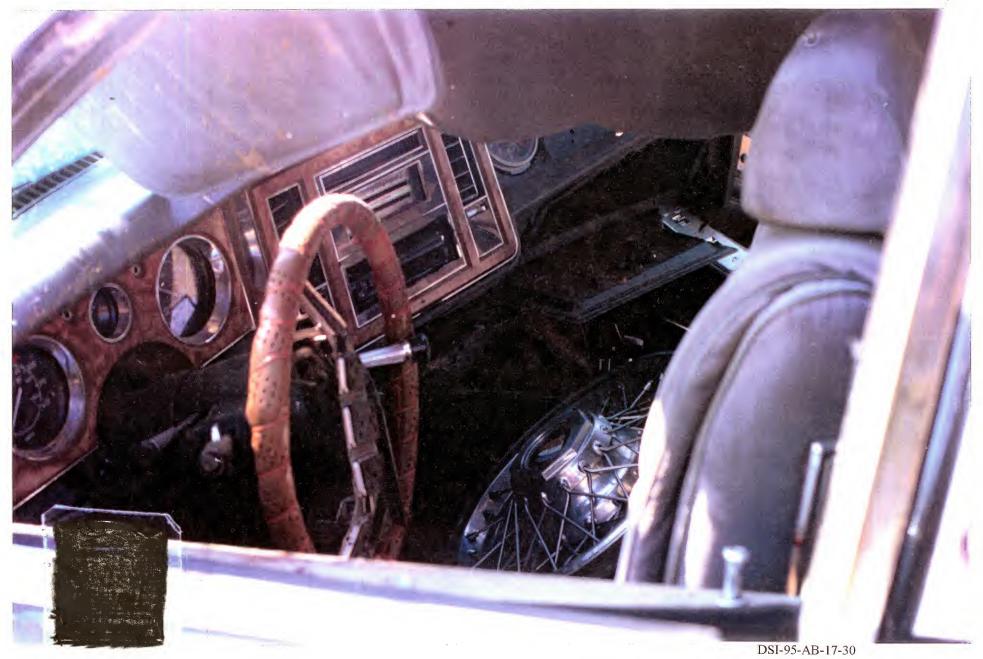
DSI-95-AB-17-26 Police Photos



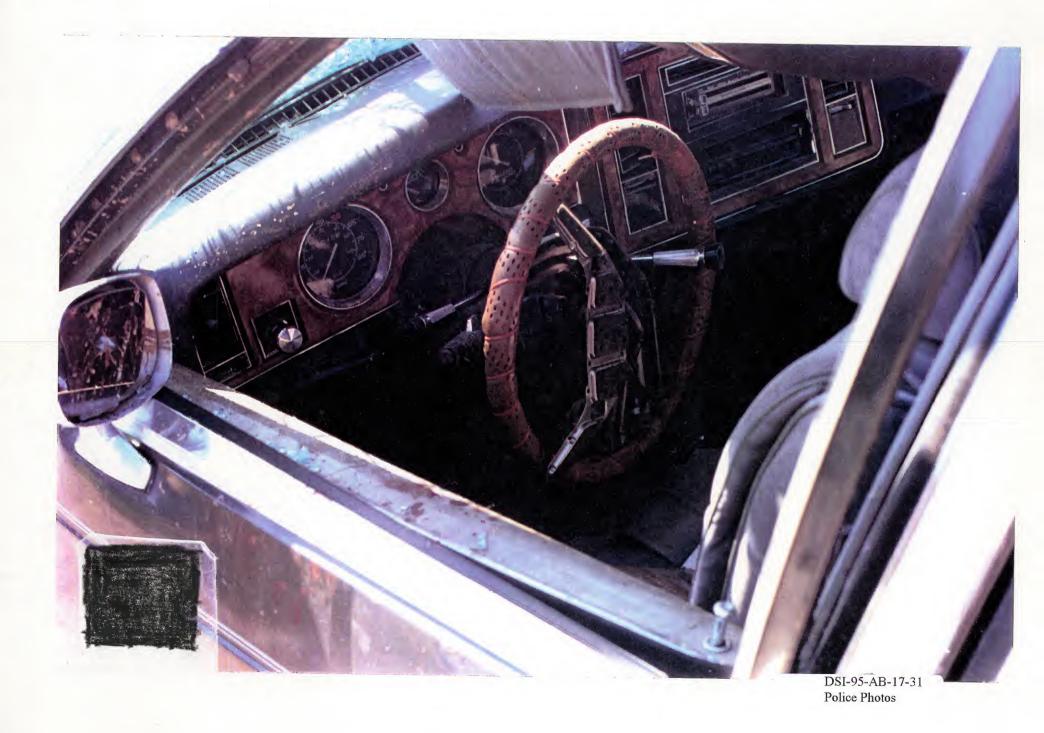
DSI-95-AB-17-27 Police Photos







DSI-95-AB-17-30 Police Photos



SELECTED INSURANCE PHOTOS

Case No. DSI-95-AB-17

PHOTO NO.	VEHICLE NO.	DIRECTION OF PICTURE	SUBJECT MATTER
1	1	NA	Interior shot showing RF seating area.
2	11	NA	Exterior.
3-4	1	NA	Interior view showing LR seat for second seat.
5	1	NA	Interior view showing RR seat for second seat.
6	1	NA	Interior view showing third seat.
7	2	NA	Exterior.
			•
- 4			

Insurance Photos

DSI-95-AB-17-01



DSI-95-AB-17-02





DSI-95-AB-17-07 Insurance Photos



DSI-95-AB-17-06 Insurance Photos



DSI-95-AB-17-05 Insurance Photos



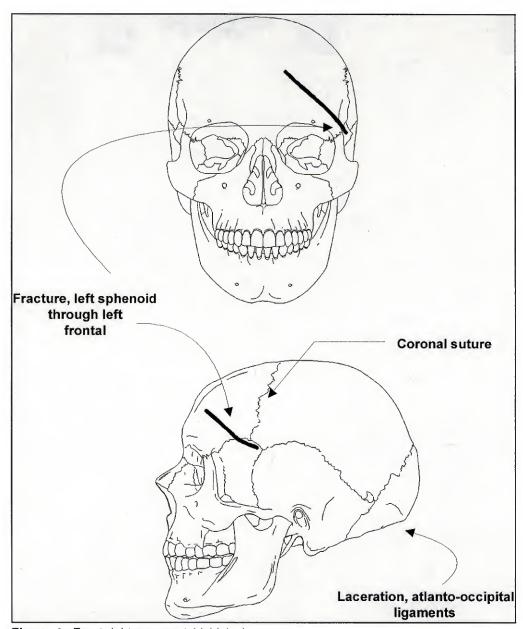


Figure 4. Front right occupant, Vehicle 1.

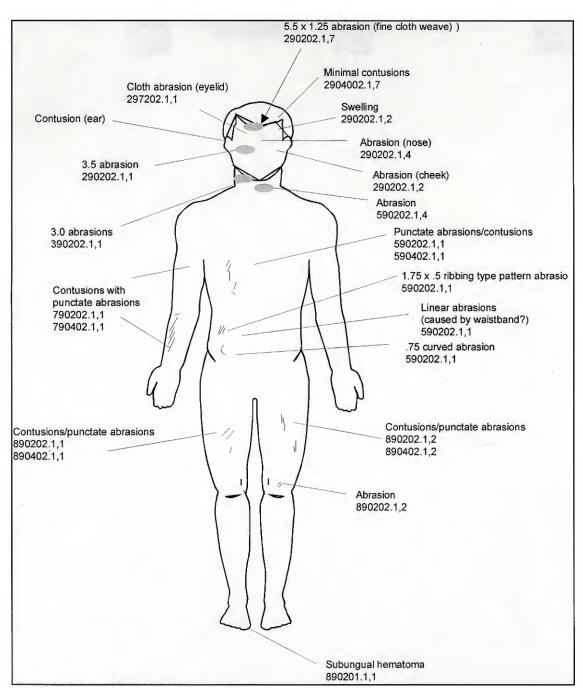


Figure 5. Front right occupant, Vehicle 1.

ACCIDENT FORM

NATIONAL ACCIDENT SAMPLING SYSTEM
CRASHWORTHINESS DATA SYSTEM

Administration					CRASHWORTHINE	SS DATA SYSTE
Primary Sampli	ng Unit Number			SPECIAL STUDI	The state of the s	
2. Case Number -	Stratum	AB 17	— has b	((✓) each special st een completed; cod s and 0 for the special	e 1 for the che	cked special
	DENTIFICATION	ON				
Number of Gen Forms Submitte		<u> </u>		SS15 Adminis		_\$_
4. Date of Acciden (Month,Day,Yea			4 5	SS16 Pedestri (Data for this specia in a separate file.)		tudy <u>0</u>
5. Time of Accider	nt _	0714	8	SS17 Impact F	Fires	
	ted military time o	f accident.	9	SS18 Unsafe i	Oriver Actions	<u> 4</u>
NOTE: Mid Unl	Inight = 2400 known = 9999		10	\$\$19		 .
				NUMBER (OF EVENTS	
				lumber of Recorded This Accident	Events	4 /
			c	code the number of ending this accident.	vents which occu	
		ACCID	ENT EVEN	TS		
For each event tha vehicle or object in	it occurred in the ac n the right columni	cident, code the low		vehicle in the left col	umns and the oth	er involved
Accident Event	Vahiala	01 04	General	Vehicle Number		General
Sequence Number	Vehicle Number	Class Of Vehicle	Area of Damage	or Object Contacted	Class Of Vehicle	Area of Damage
12. <u>0 1</u>	13. <u>\$ </u>	14. <u>2</u> Ø	15. <u>F</u>	16. <u>4 2</u>	17. Ø <u>5</u>	18. <u>F</u>
19. <u>0 2</u>	20	21	22	23	24	25
26. <u>0</u> <u>3</u>	27	28	29	30	31	32
33. <u>0 4</u>	34	35	36	37	38	39
40. <u>0</u> <u>5</u>	41	42	43	44	45	46

IF GREATER THAN FIVE EVENTS, CONTINUE CODING ON THE ACCIDENT EVENT SUPPLEMENT

CODES FOR VEHICLE NUMBER OR OBJECT CONTACTED (24, 500 kgs GVWR) Collision with Fixed Object (4, 1) Noncollision injury (23) Noncollision injury (23) Noncollision injury (24) Sinubery or post (4, 1) Collision with Fixed Object (4, 2) Noncollision injury (24) Tree (10 cm in diameter) (25) Read was post of post (45) Noncollision injury (25) Noncollision injury (25) Noncollision injury (25) Read was post (4, 20) Collision with Fixed Object (45) Noncollision injury (25) Noncollision injury (25) Pole or post (27) cui in diameter) (25) Pole or post (27) cui post (28) cui in diameter) (25) Pole or post (27) cui in diameter) (25) Cher or post (27) cui in diameter) (25) Cher or post (27) cui in diameter) (25) Pole or post (27) cui in diameter) (25) Cher or post (27) cui in diameter) (25) Pole or post (27) cui in diameter) (25) Pole or post (27) cui in diameter) (27) Pole or post (27) cui in diameter) (28) Pole or post (27) cui in diameter) (29) Pole or post	CODES FOR CLASS OF VEHICLE			
0.10 2.0 2	(00) Not a motor vehicle	(31) Large pickup truck (≤ 4,500 kgs GVWR)		
(02) Compact (wheelbase ≥ 254 but < 255 cm) (03) Intermediate (wheelbase ≥ 259 but < 291 cm) (04) Full size (wheelbase ≥ 279 toth < 291 cm) (05) Largest (wheelbase ≥ 279 toth < 291 cm) (05) Largest (wheelbase ≥ 279 toth < 291 cm) (06) Unknown passenger car size (15) Large utility vehicle (≤ 4,500 kgs GWWR) (15) Large utility vehicle (≤ 4,500 kgs GWWR) (16) Unknown utility type (17) Unknown utility type (18) Unknown utility type (19) Unknown utility type (19) Unknown utility type (19) Unknown utility type (10) Minivar (≤ 4,500 kgs GWWR) (19) Unknown utility type (10) Minivar (≤ 4,500 kgs GWWR) (10) Unknown utility type (10) Minivar (≤ 4,500 kgs GWWR) (10) Unknown utility type (11) Unknown utility type (12) Unknown utility type (13) Unknown utility type (14) Unknown utility type (15) Unknown utility type (16) Unknown utility type (17) Undercarriage (17) Undercarriage (17) Undercarriage (18) Back of unit with cargo area (17) Frenc (18) Back (rear of tracitor) (17) Undercarriage (18) Unknown utility type (17) Unknown utility type (18) Unknown utility type (18) Unknown utility type (18) Unknown utility type (19) Unknown (19) Unknown (10) Unknown (1	(01) Subcompact/mini (wheelbase < 254 cm)			
(04) Full size (wheelbase ≥ 278 but < 291 cm) (05) Largest (wheelbase ≥ 279 cm) (09) Uhrknown passenger car size (14) Compact utility vehicle (2 4,500 kgs GVWR) (15) Large utility vehicle (2 4,500 kgs GVWR) (16) Uhrknown utility vehicle (2 4,500 kgs GVWR) (17) Uhrknown utility type (18) Uhrknown utility type (19) Uhrknown utility type (20) Minvan (2 4,500 kgs GWWR) (21) Uhrknown utility type (22) Offervan (4,500 kgs GWWR) (23) Uhrknown van type (4,500 kgs GWWR) (24) Van Bassel school bus (4,500 kgs GWWR) (25) Uhrknown van type (4,500 kgs GWWR) (27) Uhrknown van type (4,500 kgs GWWR) (28) Uhrknown van type (4,500 kgs GWWR) (29) Uhrknown van type (6,4,500 kgs GWWR) (29) Uhrknown medium/heavy truck type (20) Minvan van type (6,4,500 kgs GWWR) (20) Other vehicle (20) Minvan van type (6,4,500 kgs GWWR) (21) Uhrknown ingithraedium/heavy truck type (22) Uhrknown ingithraedium/heavy truck type (23) Uhrknown ingithraedium/heavy truck type (24) Uhrknown ingithraedium/heavy truck type (25) Markedium/heavy truck type (26) Markedium/heavy truck type (27) Uhrknown ingithraedium/heavy truck type (28) Markedium/heavy truck type (29) Uhrknown (20) Uhrknown (20) Uhrknown (20) Uhrknown (21) Uhrknown (21) Uhrknown (22) East of trailler or straight truck. (23) Carboter or straight truck. (24) Tire (7) Uhrknown (25) Walliam (26) Debe or post (6,10 cm in diameter) (27) Uhrknown (28) Walliam (29) Uhrknown (29) Uhr	(02) Compact (wheelbase ≥ 254 but < 265 cm)			
(95) Largest (wheelbase ≥ 291 cm) (96) Unknown passenger care faze (14) Compact utility vehicle (4,500 kgs GVWR) (15) Large utility vehicle (4,500 kgs GVWR) (16) Usility station wagon (4,500 kgs GVWR) (17) Unknown utility bye (18) Unknown utility bye (19) Unknown (19) Unknown utility bye (19) Unknown utility bye (19) Unknown (19) Unknown utility bye (19) Unknown (19) Unknown (19) Unknown utility bye (19) Unknown (19) Unknown (19) Unknown utility bye (19) Unknown ((45) Other light truck (≤ 4,500 kgs GVWR)		
(09) Unknown passenger car size (50) School bus (excludes van based) < 4,500 kgs GWWR) (14) Compact utility whitele (£ 4,500 kgs GWWR) (59) Unknown bus type (51) Unknown utility type (67) Tractor without trailer (7) Unknown utility type (67) Unknown utility type (67) Tractor without trailer (7) Unknown utility type (8) Unknown utility (9) Unknown utility (9) Unknown utility (9) Unknown utility (9) Unknown utility (1) Undercarriage (1) Undercarr		(48) Unknown light truck type (≤ 4,500 kgs GVWR)		
(14) Compact utility wehicle (2, 4, 500 kgs GVWR) (15) Large utility wehicle (2, 4, 500 kgs GVWR) (16) Utility wehicle (2, 4, 500 kgs GVWR) (17) Unknown utility bype (20) Minivan (2, 4, 500 kgs GVWR) (21) Large van (2, 4, 500 kgs GVWR) (22) Van Based school bus (2, 4, 500 kgs GVWR) (23) Other van hype (2, 4, 500 kgs GVWR) (29) Unknown van type (2, 4, 500 kgs GVWR) (29) Unknown van type (2, 4, 500 kgs GVWR) (29) Unknown van type (2, 4, 500 kgs GVWR) (29) Unknown van type (2, 4, 500 kgs GVWR) (30) Compact pickup truck (2, 4, 500 kgs GVWR) (30) Compact pickup truck (2, 4, 500 kgs GVWR) (30) Compact pickup truck (2, 4, 500 kgs GVWR) (30) Unknown van type (2, 4, 500 kgs GVWR) (30) Unknown van type (2, 4, 500 kgs GVWR) (30) Unknown van type (2, 4, 500 kgs GVWR) (30) Unknown CODES FOR CENERAL AREA OF DAMAGE (GAD) (30) Noncollision (30) Noncollision (31) Noncollision (4R) Right side (4) Left side (5B) Back of unit with cargo area (rear of trailler or straight truck) (5B) Back of unit with cargo area (rear of trailler or tartight truck) (7) Fence (8B) Back of unit with cargo area (rear of trailler or tartight truck) (7) Fence (8B) Back of unit with cargo area (rear of trailler or tartight truck) (7) Fence (8B) Back of unit with cargo area (rear of trailler or tartight truck) (7) Fence (8B) Back of unit with cargo area (rear of trailler or tartight truck) (7) Fence (8B) Back of unit with cargo area (rear of trailler or tartight truck) (7) Fence (8B) Back of unit with cargo area (rear of trailler or tartight truck) (7) Fence (8B) Back of unit with cargo area (rear of trailler) (7) Fence (8B) Back of unit with cargo area (rear of trailler) (7) Fence (8B) Back of unit with cargo area (rear of trailler) (7) Fence (8B) Back of unit with cargo area (rear of trailler) (7) Fence (8B) Back of unit with cargo area (rear of trailler) (7) Fence (8B) Back of unit with cargo area (rear of trailler) (7) Fence (8B) Building (9B) Unknown (1) Unidercarriage (9B) Uninnown (1) Unidercarriage (9B) Uninnown (1) Unidercarriage (1) Unidercarri	•	· · · · · · · · · · · · · · · · · · ·		
(15) Large utility wehicle (≤ 4,500 kgs GVWR) (16) Uhiknown utility type (17) Uhrknown utility type (18) Uhrknown utility type (19) Uhrknown van type (≤ 4,500 kgs GVWR) (19) Uhrknown utility type (19) Uhrknown van type (≤ 4,500 kgs GVWR) (19) Uhrknown utility type (19) Uhrknown van type (≤ 4,500 kgs GVWR) (19) Uhrknown utility type (10) Other vehicle (10) Not a motor vehicle (10) Not a motor vehicle (10) Not a motor vehicle (10) Noncollision (10) Experiment (10) No	, ,			
(16) Uilisy station wagon (£ 4,500 kgs GVWR) (19) Unknown utility type (20) Minivan (£ 4,500 kgs GVWR) (21) Large van (£ 4,500 kgs GVWR) (22) Uhknown (£ 4,500 kgs GVWR) (23) Uhknown van type (£ 4,500 kgs GVWR) (24) Uhknown van type (£ 4,500 kgs GVWR) (25) Uhknown van type (£ 4,500 kgs GVWR) (26) Uhknown van type (£ 4,500 kgs GVWR) (27) Uhknown van type (£ 4,500 kgs GVWR) (28) Uhknown van type (£ 4,500 kgs GVWR) (29) Uhknown van type (£ 4,500 kgs GVWR) (29) Uhknown van type (£ 4,500 kgs GVWR) (29) Uhknown (20) Uhknown van type (£ 4,500 kgs GVWR) (30) Compact pickup truck (£ 4,500 kgs GVWR) (30) Uhknown van type (£ 4,500 kgs GVWR) (40) Noncollision (41) Noncollision (42) Reght side (43) Moncollision (44) Explain van type (£ 4,500 kgs GVWR) (45) VerlicLES (47) Font (48) Moncollision (49) Uhknown (49) Uhknown (40) Uhknown (40) Uhknown (40) Uhknown (41) Uhknown (42) Tree (£ 10 cm in diameter) (43) Shrubbery or bush (44) Embankmant (45) Breakaway pole or post (any diameter) (54) Pole or post (£ 10 cm in diameter) (55) Pole or post (£ 10 cm in diameter) (56) Obeit or first diameter unknown (56) Obeit or first diameter unknown (57) Uhknown indiameter unknown (58) Uhknown indiameter unknown (59) Uhknown (50) Other traffic barrier (50) Obei or post (£ 10 cm in diameter) (50) Other traffic barrier (includes guardrail)				
(19) Unknown utility type (20) Minkrow, (2, 4500 kgs GWWR) (21) Large van (2, 4,500 kgs GWWR) (22) Other van type (2, 4,500 kgs GWWR) (23) Other van type (2, 4,500 kgs GWWR) (25) Other van type (2, 4,500 kgs GWWR) (26) Other van type (2, 4,500 kgs GWWR) (27) Unknown van type (2, 4,500 kgs GWWR) (28) Other van type (2, 4,500 kgs GWWR) (29) Unknown CODES FOR GENERAL AREA OF DAMAGE (GAD) (29) Unknown CODES FOR GENERAL AREA OF DAMAGE (GAD) (30) Noncollision (40) Noncollision (50) Back (60) Back (71) Top (71) Top (71) Undercarriage (81) Unknown CODES FOR VEHICLE NUMBER OR OBJECT CONTACTED (82) Wall Noncollision (31) Overturn — rollover (excludes end-over-end) (32) Rollover — end-over-end (33) For or explosion (34) Jackknife (35) Other intraunit damage (specify): (36) Noncollision (specify): (37) Noncollision (specify): (38) Other noncollision (specify): (39) Noncollision With Eixed Object (41) Tree (2 10 cm in diameter) (42) Tree (2 10 cm in diameter) (43) Shrubbery or bush (44) Embarkment (45) Breakaway pole or post (any diameter) (55) Inpact attenuator (55) Unkorwn noncolles (in transport (76) Animal (77) Object fell from vehicle in transport (77) Object fell from vehicle in transport (78) Unknown noncolles in transport (79) Unknown fixed object (79) Passenger car, light truck, van, or other vehicle not in-transport (79) Object for opost (2 10 cm in diameter) (79) Object for opost (3 0 cm in diameter) (79) Object or opost (4 10 cm in diameter) (79) Object fell from vehicle in transport (79) Object fell from		, ,		
(20) Minivan (z 4,500 kgs GWWR) (21) Large van (z 4,500 kgs GWWR) (23) Other van type (z 4,500 kgs GWWR) (29) Uhrawn van type (z 4,500 kgs GWWR) (20) Notar motor vehicle (20) Not a motor vehicle (30) Not a motor vehicle (40) Not a motor vehicle (41) Tree (z 10 cm in diameter) (42) Tree (z 10 cm in diameter) (43) Shrawn van type (z 4,500 kgs GWWR) (44) Embankment (45) Breaksway pole or post (z 10 cm in diameter) (46) Pole or post (z 10 cm in diameter) (47) Pole or post (z 10 cm in diameter) (48) Breaksway pole or post (z 10 cm in diameter) (49) Pole or post (z 10 cm in diameter) (40) Pole or post (z 10 cm in diameter) (41) Tree (z 10 cm in diameter) (42) Tree (z 10 cm in diameter) (43) Shrabbery or bush (44) Embankment (45) Breaksway pole or post (z 20 cm in diameter) (46) Pole or post (z 10 cm in diameter) (47) Vehicle occupant (48) Nonbreaksway Pole or Post (49) Pole or post (z 10 cm in diameter) (49) Pole or post (z 10 cm in diameter) (49) Pole or post (z 10 cm in diameter) (49) Pole or post (z 10 cm in diameter) (40) Pole or post (z 10 cm in diameter) (41) Tree (z 10 cm in diameter) (42) Free (z 10 cm in diameter) (43) Shrabbery or bush (44) Embankment (45) Breaksway pole or post (any diameter) (46) Pole or post (z 10 cm in diameter) (47) Other nonmotorist or conveyance (48) Uhrawnn nonfixed object (49) Uhrawnn nonfixed object (49) Uhrawnn nonfixed object (49) Uhrawnn nonfixed obj		· · · · · · · · · · · · · · · · · · ·		
(21) Large van (£ 4,500 kgs GWWR) (28) Other van type (£ 4,500 kgs GWWR) (29) Unknown van type (£ 4,500 kgs GWWR) (20) Unknown van type (£ 4,500 kgs GWWR) (21) Unknown van type (£ 4,500 kgs GWWR) (22) Unknown van type (£ 4,500 kgs GWWR) (23) Rollout van type (£ 4,500 kgs GWWR) (24) Shrubber van type (£ 4,500 kgs GWWR) (25) Van type (£ 4,500 kgs GWWR) (26) Unknown van type (£ 4,500 kgs GWWR) (27) Passengre (27) Passeng		• •		
(24) Van Based school bus (£ 4,500 kgs GWWR) (29) Unknown van type (£ 4,500 kgs GWWR) (29) Unknown CODES FOR GENERAL AREA OF DAMAGE (GAD) (R) Right side (R) Right side (T) Top (U) Undercarriage (P) Front (B) Back (C) Rear of cab (V) Front of cargo area (rear of trailer or straight truck) (P) Front (P) Right side (P) Back (rear of trailer or straight truck) (P) Front of cargo area (rear of trailer or straight truck) (P) Front of cargo area (rear of trailer or straight truck) (P) Front of cargo area (rear of trailer or straight truck) (P) Front of cargo area (rear of trailer or straight truck) (P) Front of cargo area (rear of trailer or straight truck) (P) Front of cargo area (rear of trailer or straight truck) (P) Front of cargo area (rear of trailer or straight truck) (P) Front of cargo area (rear of trailer or straight truck) (P) Front of cargo area (rear of trailer or straight truck) (P) Front of cargo area (rear of trailer or straight truck) (P) Front of cargo area (rear of trailer or straight truck) (P) Front of cargo area (rear of trailer or straight truck) (P) Front of cargo area (rear of trailer or straight truck) (P) Front of cargo area (rear of trailer or straight truck) (P) Front of cargo (P) Front of cargo (P) Front of cargo				
(28) Other van type (z 4,500 kgs GVWR) (29) Unknown van type (z 4,500 kgs GVWR) (30) Compact pickup truck (z 4,500 kgs GVWR) (30) Other vehicle (30) Unknown CODES FOR GENERAL AREA OF DAMAGE (GAD) (L) Left side (L) Left side (L) Left side (L) Left side (C) Rear of cab (V) Front of cargo area (rear of trailer or straight truck) (F) Front (R) Right side (D) Back (rear of tractor) (D) Back (rear of tractor) (D) Back (rear of tractor) (D) Honown CODES FOR VEHICLE NUMBER OR OBJECT CONTACTED (101-30) — Vehicle Number (57) Fence (58) Wall (101-30) — Vehicle Number (57) Fence (58) Wall (101-30) — Vehicle Number (58) Wall (101-30) — Vehicle Number (59) Unknown CODES FOR VEHICLE NUMBER OR OBJECT CONTACTED (101-30) — Vehicle Number (59) Unknown CODES FOR VEHICLE NUMBER OR OBJECT CONTACTED (101-30) — Vehicle Number (58) Wall (101-30) — Vehicle Number (59) Unknown (101-30) — Vehicle Number (50) Wall (101-30) — Vehicle Number (50) Wall (101-30) — Vehicle Number (50) Wall (101-30) — Vehicle Number (50) Unknown (50) Wall (50) Other intraint damage (specify): (60) Ditch or culvert (61) Ground (62) Fire hydrant (63) Curb (64) Bridge (63) Other fixed Object (70) Passenger car, light truck, van, or other vehicle not in-transport (71) Medium/heavy truck or bus not in-transport (72) Pedestrian (73) Cyclist or cycle (74) Other nomonotist or conveyance (74) Other nomonotist or conveyance (75) Vehicle occupant (76) Animal (77) Train (78) Vehicle occupant (79) Object fell from vehicle in-transport (80) Unknown nonfixed object (80) Unkno		· · ·		
Compact pickup truck (≤ 4,500 kgs GVWR)	ti i e e e e e e e e e e e e e e e e e e			
CODES FOR GENERAL AREA OF DAMAGE (GAD) CODS APPLICABLE (N) Noncollision (F) Front (B) Back (1) Top APPLICABLE (N) Noncollision (F) Front (B) Back (9) Unknown TDC (0) Not a motor vehicle (B) Back (9) Unknown TDC (I) Noncollision (F) Front (B) Back (I) Top APPLICABLE (N) Noncollision (F) Front (R) Right side (I) Undercarriage (gear of trailer or straight truck) (I) Top (II) Undercarriage (rear of trailer or straight truck) (I) Front (I) Top (II) Undercarriage (gear of trailer or straight truck) (I) Back (rear of trailer or straight truck) (I) Front (II) Top (III) Ordercarriage (gear of trailer or straight truck) (III) Ordercarriage (ge		, , ,		
CODES FOR GENERAL AREA OF DAMAGE (GAD) CDS APPLICABLE AND OTHER (N) Noncollision (L) Left side (W) Unknown (E) Back (P) Front (R) Right side (C) Rear of cab (P) Front (F) Front (R) Right side (E) Back of unit with cargo area (rear of trailer or straight truck) (F) Front (R) Right side (D) Back (rear of trailer or straight truck) (D) Back (rear of tractor) (O1-30) — Vehicle Number CODES FOR VEHICLE NUMBER OR OBJECT CONTACTED (O1-30) — Vehicle Number (O1-30) — Vehicle Number CODES FOR VEHICLE NUMBER OR OBJECT CONTACTED (O1-30) — Vehicle Number (S5) Wall (S1) Overturn — rollover (excludes end-over-end) (32) Rollover — end-over-end (33) Fire or explosion (34) Jackkinfe (35) Other intraunit damage (specify): (36) Noncollision injury (38) Other innocollision (specify): (39) Noncollision — details unknown Collision With Fixed Object (41) Tree (s 10 cm in diameter) (42) Tree (s 10 cm in diameter) (43) Shrubbery or bush (54) Breakaway pole or Post (55) Pole or post (s 10 cm in diameter) (56) Pole or post (s 10 cm in diameter) (57) Pole or post (control diameter) (58) Pole or post (diameter unknown) (59) Unknown fixed object (70) Passenger car, light truck, van, or other vehicle not in-transport (71) Train (72) Pedestrian (73) Cyclist or cycle (74) Other nonmotist or conveyance (75) Vehicle occupant (76) Animal (77) Train (78) Right side (P) Unknown fixed object (79) Passenger car, light truck, van, or other vehicle not in-transport (70) Pole or post (s 10 cm in diameter) (71) Medium/heavy truck or bus not in-transport (73) Cyclist or cycle (74) Other nonmotinist or conveyance (75) Vehicle occupant (77) Train (78) Trailer, disconnected in transport (79) Object fell from vehicle in-transport (79) Object fell from veh	· · · · · · · · · · · · · · · · · · ·	, ,		
CDS APPLICABLE (I) Not a motor vehicle (R) Right side (L) Left side (B) Back (I) Undercarriage (I) Unknown TDC (II) Not a motor vehicle (II) Left side (III) East (rear of trailer or straight truck) (III) Undercarriage (III) Undercarriage (IIII) Undercarriage (IIII) Undercarriage (IIII) Undercarriage (IIII) Undercarriage (IIII) Undercarriage (IIII) Undercarriage (IIIII) Undercarriage (IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	(55) Sompast pickap wask (\$ 4,000 kgs \$ 4441)	(99) OHKHOWH		
AND OTHER VEHICLES (F) Front (D) Not a motor vehicle (B) Back (E) Back (C) Rear of cab (P) Front (rear of trailer or straight truck) (F) Front (R) Right side (D) Back (rear of tractor) (D) Back (rear of tractor) (U) Undercarriage (P) Front or creating the truck (P) Front of cargo area (rear of trailer or straight truck) (F) Front (R) Right side (D) Back (rear of tractor) (U) Undercarriage (P) Unknown (U) Front of cargo area (F) Fence (F) Unknown (E) Unknown (F) Front (F) Font (F) East (F) Fence (F) Unknown (E) Building (F) Ground (E) Ditch or culvert (F) Ground (E) Building (F) Ground (E) Ditch or culvert (F) Ground (F) G				
VEHICLES (F) Front (B) Back (B) Back (C) Rear of cab (V) Front of cargo area (rear of trailer or straight truck) (D) Back (rear of tractor) (D) Back (rear of tractor) (U) Undercarriage (P) Front (R) Right side (D) Back (rear of tractor) (U) Undercarriage (P) Unknown (O1-30) — Vehicle Number (O2-30) — Vehicle Number (O2-30) — Vehicle Number (O3-30) — Vehicle Number (O4-30) — Vehicle Number (O5-30) — Vehicle Nu				
TDC (0) Not a motor vehicle APPLICABLE (N) Noncollision (R) Right side (F) Front (R) Right side (D) Back (rear of trailer or straight truck) (D) Back (rear of trailer or straight truck) (D) Undercarriage (P) Unknown CODES FOR VEHICLE NUMBER OR OBJECT CONTACTED (01-30) — Vehicle Number (57) Fence (58) Wall Noncollision (31) Overturn — rollover (excludes end-over-end) (60) Ditch or culvert (61) Ground (62) Fire hydrant (63) Curb (62) Fire hydrant (63) Curb (63) Ditch or culvert (63) Curb (64) Bridge (68) Other intraunit damage (specify): (68) Other fixed object (specify): (39) Noncollision — details unknown (69) Unknown fixed object (specify): (69) Unknown fixed object (70) Passenger car, light truck, van, or other vehicle not in-transport (71) Medium/heavy truck or bus not in-transport (72) Pedestrian (73) Cyclist or cycle (74) Other nonmotorist or conveyance (75) Pole or post (2 10 cm in diameter) (74) Other nonmotorist or conveyance (75) Pole or post (2 10 cm in diameter) (76) Pole or post (2 10 cm in diameter) (77) Train (2 10 cm in diameter) (78) Pole or post (2 10 cm in diameter) (79) Pole or post (2 10 cm in diameter) (79) Pole or post (2 10 cm in diameter) (79) Pole or post (2 10 cm in diameter) (79) Pole or post (2	()	• • • • • • • • • • • • • • • • • • • •		
APPLICABLE (N) Noncollision (F) Front (P) Front (R) Right side (P) Front (P) Front (R) Right side (P) (D) Back (rear of trailer or straight truck) (P) Unknown CODES FOR VEHICLE NUMBER OR OBJECT CONTACTED (01-30) — Vehicle Number (57) Fence (58) Wall Noncollision (31) Overturn — rollover (excludes end-over-end) (32) Rollover — end-over-end (61) Ground (33) Fire or explosion (62) Fire hydrant (34) Jackknife (63) Curb (64) Bridge (68) Other fixtaunit damage (specify): (68) Bridge (68) Other fixed object (specify): (36) Noncollision injury (38) Other noncollision (specify): (69) Unknown fixed object Collision With Fixed Object (70) Passenger car, light truck, van, or other vehicle not in-transport (42) Tree (≥ 10 cm in diameter) (73) Cyclist or cycle (44) Embankment (45) Breakaway pole or post (any diameter) (74) Other nonmotorist or conveyance Nonbreakaway Pole or Post (50) Pole or post (≥ 10 cm in diameter) (77) Train (51) Pole or post (≥ 10 cm in diameter) (79) Object fill from vehicle in-transport (79) Object fill from vehicle in-trans	VEHICLES (F) FIGHT	(b) Back (9) Unknown		
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Administration	GENERAL VI	HICLE FORM NATIONAL ACCIDENT SAMPLING CRASHWORTHINESS DATE	G SYST A SYST
Primary Sampling Unit Number		12. Speed Limit ϕ θ	9
Case Number - Stratum _	ABIT	(000) No statutory limit Code posted or statutory speed limit	
3. Vehicle Number	4 1	in kmph (999) Unknown	
VEHICLE IDENTIFIC	ATION	<u>55</u> mph X 1.6093 ≈ <u>4 8 9</u> kmph	
Vehicle Model Year Code the last two digits of the mod (99) Unknown	del year	13. Police Reported Alcohol Presence For Driver (0) No alcohol present	<u></u>
5. Vehicle Make (specify):	ø 9	(1) Yes alcohol present (7) Not reported (8) No driver present	
PLYMOUTH Applicable codes are found in you	'	(9) Unknown	
NASS Data Collection, Coding and Editing Manual. (99) Unknown		Code actual value (decimal implied before first digit—0.xx)	6
6. Vehicle Model (specify): GRAJO VOYAGE		(95) Test refused (96) None given (97) AC test performed, results unknown	
Applicable codes are found in you NASS Data Collection, Coding and Editing Manual.		(98) No driver present (99) Unknown	
(999) Unknown		Source:	
 Body Type Note: Applicable codes may be for the back of this page. 		15. Police Reported Other Drug Presence For Driver (0) No other drug(s) present	
8. Vehicle Identification Number		(1) Yes other drug(s) present (7) Not reported (8) No driver present	
1 P 4 G H 4 4 R 1 R X		(9) Unknown	
1 2 3 4 5 6 7 8 9 10 11 Left justify; Slash zeros and letter 2 No VIN—Code all Unknown—Code all nines	12 13 14 15 16 17 Z (0 and Z) zeros	16. Other Drug Specimen Test Result For Driver (0) No specimen test given	<u>\$</u>
Vehicle Special Use (This Trip)	φ	(1) Drug(s) not found in specimen(2) Drug(s) found in specimen, (specify):	
(0) No special use (1) Taxi		(3) Specimen test given, results unknown o obtained	r not
(2) Vehicle used as school bus(3) Vehicle used as other bus(4) Military		(8) No driver present (9) Unknown if specimen test given	
(5) Police(6) Ambulance		17. Driver's Zip Code	
(7) Fire truck or car(8) Other (specify):		(00001) Driver not a resident of U.S. or territories	
(9) Unknown		Code actual 5-digit zip code (99998) No driver present	
OFFICIAL RECOR	RDS	(99999) Unknown	
10. Police Reported Vehicle Dispositio(0) Not towed due to vehicle dama	n	18. Driver's Race/Ethnic Origin	9
(1) Towed due to vehicle damage	ıye	(1) White (non-Hispanic) (2) Black (non-Hispanic)	
(9) Unknown		(3) White (Hispanic) (4) Black (Hispanic)	
11. Police Reported Travel Speed	<u>\$ 9 7</u>	(5) American Indian, Eskimo or Aleut	
Code to the nearest kmph (NOTE: less than 0.5 kmph) (160) 159.5 kmph and above	oou means	(6) Asian or Pacific Islander(7) Other (specify):	
(190) 139.5 kmph and above (999) Unknown mph X 1.6093 = kmph		(8) No driver present (9) Unknown	

CODES FOR BODY TYPE

CDS APPLICABLE VEHICLES

Automobiles

- (01) Convertible (excludes sun-roof, t-bar)
- (02) 2-door sedan, hardtop, coupe
- (03) 3-door/2-door hatchback
- (04) 4-door sedan, hardtop
- (05) 5-door/4-door hatchback
- (06) Station wagon (excluding van and truck based)
- (07) Hatchback, number of doors unknown
- (08) Other automobile type (specify):
- (09) Unknown automobile type

Automobile Derivatives

- (10) Auto based pickup (includes El Camino, Caballero, Ranchero, Brat, and Rabbit pickup)
- (11) Auto based panel (cargo station wagon, auto based ambulance/hearse)
- (12) Large limousine more than four side doors or stretched chassis
- (13) Three-wheel automobile or automobile derivative

Utility Vehicles (≤ 4,500 kgs GVWR)

- (14) Compact utility (Jeep CJ-2 CJ-7, Scrambler, Golden Eagle, Renegade, Laredo, Wrangler, Cherokee [84 and after], Dispatcher, Raider, Bronco II, Bronco [76 and before], Explorer, S-10 Blazer, Geo Tracker, Bravada, S-15 Jimmy, Thing, Pathfinder, Trooper, Trooper II, Rodeo, Amigo, Navajo, 4-Runner, Montero, Passport, Samurai, Sidekick, Rocky)
- (15) Large utility (includes Jeep Cherokee [83 and before], Ramcharger, Trailduster, Bronco-fullsize [78 and after], fullsize Blazer, fullsize Jimmy, Hummer, Landcruiser, Rover, Scout, Yukon)
- (16) Utility station wagon (Chevy Suburban, GMC Suburban, Travelall, Grand Wagoneer, includes suburban limousine)
- (19) Utility, unknown body type

Van Based Light Trucks (≤ 4,500 kgs GVWR)

- (20) Minivan (Town and Country, Caravan, Grand Caravan, Voyager, Grand Voyager, Mini-Ram, Vista, Aerostar, Windstar, Villager, Lumina APV, Trans Sport, Silhouette, Astro, Safari, Toyota Van, Toyota Minivan, Previa, Nissan Minivan, Quest, Mitsubishi Minivan, Expo Wagon, Vanagon/Camper.)
- (21) Large van (B150-B350, Sportsman, Royal, Maxiwagon, Ram, Tradesman, Voyager [83 and before], E150-E350, Econoline, Clubwagon, Chateau, G10-G30, Chevy Van, Beauville, Sport Van, G15-G35, Rally Van, Vandura.)
- (22) Step van or walk-in van (≤ 4,500 kgs GVWR)
- (23) Van based motorhome (≤ 4,500 kgs GVWR)
- (24) Van based school bus (≤ 4,500 kgs GVWR)
- (25) Van based other bus (≤ 4,500 kgs GVWR)
- (28) Other van type (Hi-Cube Van, Kary) (specify):
- (29) Unknown van type

- (30) Compact pickup (D50, Colt P/U, Ram 50, Dakota, Arrow Pickup [foreign], Ranger, Courier, S-10, T-10, LUV, S-15, T-15, Sonoma, Datsun/Nissan Pickup, P'up, Mazda Pickup, Toyota Pickup, Mitsubishi Pickup)
- (31) Large Pickup (Jeep Pickup, Comanche, Ram Pickup, D100-D350, W100-W350, F100-F350, C10-C35, K10-K35, R10-R35, V10-V35, Silverado, Sierra, R100-R500, T100)

- (32) Pickup with slide-in camper
- (33) Convertible pickup
- (39) Unknown pickup style light conventional truck type

Other Light Trucks (≤ 4,500 kgs GVWR)

- (40) Čab chassis based (includes rescue vehicles, light stake, dump, and tow truck)
- (41) Truck based panel
- (42) Light truck based motorhome (chassis mounted)
- (45) Other light conventional truck type
- (48) Unknown light truck type
- (49) Unknown light vehicle type (automobile, utility, van, or light truck)

OTHER VEHICLES

Buses (Excludes Van Based)

- (50) School bus (designed to carry students, not cross country or transit)
- (58) Other bus type (e.g., transit, intercity, bus based motorhome) (specify):
- (59) Unknown bus type

Medium/Heavy Trucks (> 4,500 kgs GVWR)

- (60) Step van (> 4,500 kgs GVWR)
- (61) Single unit straight truck (4,500 kgs < GVWR ≤ 8,850 kgs)
- (62) Single unit straight truck (8,850 kgs < GVWR ≤ 12,000 kgs)
- (63) Single unit straight truck (> 12,000 kgs GVWR)
- (64) Single unit straight truck, GVWR unknown
- (65) Medium/heavy truck based motorhome
- (67) Truck-tractor with no cargo trailer
- (68) Truck-tractor pulling one trailer
- (69) Truck-tractor pulling two or more trailers
- (70) Truck-tractor (unknown if pulling trailer)
- (78) Unknown medium/heavy truck type
- (79) Unknown truck type (light/medium/heavy)

Motored Cycles (Does Not Include All-Terrain Vehicles/Cycles)

- (80) Motorcycle
- (81) Moped (motorized bicycle)
- (82) Three-wheel motorcycle or moped
- (88) Other motored cycle (minibike, motorscooter) (specify):
- (89) Unknown motored cycle type

Other Vehicles

- (90) ATV (All-Terrain Vehicle) and ATC (All-Terrain Cycle)
- (91) Snowmobile
- (92) Farm equipment other than trucks
- (93) Construction equipment other than trucks
- (97) Other vehicle type
- (99) Unknown body type

	PRECRASH ENVIRONMENTAL DATA		,
		25. Roadway Surface Condition	
19.	Relation To Interchange Or Junction	(1) Dry (2) Wet	
	(0) Non-interchange area and non-junction	(3) Snow or slush	
	(1) Interchange area related	(4) Ice	
	Non-Interchange junctions	(5) Sand, dirt, or oil	
	(2) Intersection related	(8) Other (specify):	
	(3) Driveway, alley access related	(9) Unknown	
	(4) Other junction (specify)		
		26. Light Conditions	1
	(5) Unknown type of junction	(1) Daylight	
	· ·	(2) Dark	
	(9) Unknown	(3) Dark, but lighted	
	!	(4) Dawn	
20	Trafficway Flow	(5) Dusk	
20.	(0) Not physically divided (two way traffic)	(9) Unknown	
	(1) Divided trafficway-median strip without positive		
	barrier barrier	27. Atmospheric Conditions	φ
	(2) Divided trafficway-median strip with positive barrier	(0) No adverse atmospheric-related driving	<u>~</u>
	(3) One way traffic	conditions	
	(9) Unknown	(1) Rain	
	!	(2) Sleet/hail	
21.	Number Of Travel Lanes 2	(3) Snow	
	(1) One	(4) Fog	
	(2) Two	(5) Rain and fog	
	(3) Three	(6) Sleet and fog	
	(4) Four	(7) Other (e.g., smog, smoke, blowing sand or o	Just,
	(5) Five	etc.) (specify):(9) Unknown	
	(6) Six	(a) Olikilowii	
	(7) Seven or more (9) Unknown	28. Traffic Control Device	Φ
	(a) Olikilowii	(0) No traffic control(s)	
		(1) Traffic control signal (not RR crossing)	
2 2.	Roadway Alignment		
	(1) Straight (2) Curve right	Regulatory	
	(3) Curve left	(2) Stop sign	
	(9) Unknown	(3) Yield sign (4) School zone sign	
	(b) Similaria	(4) School zone sign (5) Other regulatory sign (specify):	
22	Death and Death	(a) Other regulatory sign (apoonly).	
	Roadway Profile (1) Level	(6) Warning sign (not RR crossing)	
	(1) Level (2) Uphill grade (>2%)	(7) Unknown sign	
	(3) Hill crest	(8) Miscellaneous/other controls including RR	
	(4) Downhill grade (>2%)	controls (specify):	
	(5) Sag	(0) 11-1	
	(9) Unknown	(9) Unknown	
24.	Roadway Surface Type 2	29. Traffic Control Device Functioning	ለ
	(1) Concrete	(0) No traffic control device	*
	(2) Bituminous (asphalt)	(1) Traffic control device not functioning	
	(3) Brick or block	(specify)	
	(4) Slag, gravel, or stone	:	
	(5) Dirt	(2) Traffic control device functioning properly	
	(8) Other (specify):	(9) Unknown	
	(9) Unknown		
	.		

	PF	RECRASH DRIVER RELATED DATA	This Vehicle Traveling
30.	(Pric (00) (01)	er's Distraction/Inattention To Driving or To Recognition Of Critical Event) No driver present Attentive or not distracted Looked but did not see Distractions	 (10) Over the lane line on left side of travel lane (11) Over the lane line on right side of travel lane (12) Off the edge of the road on the left side (13) Off the edge of the road on the right side (14) End departure (15) Turning left at intersection
	(03)	By other occupant(s), (specify):	(16) Turning right at intersection (17) Crossing over (passing through) intersection
	(04)	By moving object in vehicle (specify):	(18) This vehicle decelerating (19) Unknown travel direction
	(05)	While talking or listening to cellular phone (specify location and type of phone):	Other Motor Vehicle In Lane (50) Other vehicle stopped
	(06)	While dialing cellular phone (specify location and type of phone):	(51) Traveling in same direction with lower steady speed (52) Traveling in same direction while decelerating
	(80)	While adjusting climate controls While adjusting radio, cassette, CD (specify):	 (53) Traveling in same direction with higher speed (54) Traveling in opposite direction (55) In crossover
		While using other device/object in vehicle (specify):	(56) Backing (59) Unknown travel direction of other motor vehicle in lane
	(11)	Sleepy or fell asleep Distracted by outside person, object, or event (specify):	Other Motor Vehicle Encroaching Into Lane (60) From adjacent lane (same direction)—over left lane line
	(13) (97)	Eating or drinking Smoking related Distracted/inattentive, details unknown Other, distraction (specify):	(61) From adjacent lane (same direction)—over right lane line (62) From opposite direction—over left lane line (63) From opposite direction—over right lane line
		Unknown	(64) From parking lane (65) From crossing street, turning into same direction
31.	Pre-I Reco (00) (01) (02) (03) (04) (05) (06) (07) (08) (10) (11) (12) (13) (14) (15) (16) (17)	Event Movement (Prior to organition of Critical Event) No driver present Going straight Decelerating in traffic lane Accelerating in traffic lane Starting in traffic lane Stopped in traffic lane Passing or overtaking another vehicle Disabled or parked in travel lane Leaving a parking position Entering a parking position Turning right Turning left Making a U-turn Backing up (other than for parking position) Negotiating a curve Changing lanes Merging Successful avoidance maneuver to a previous critical event Other (specify): Unknown	(65) From crossing street, turning into same direction (66) From crossing street, across path (67) From crossing street, turning into opposite direction (68) From crossing street, intended path not known (70) From driveway, turning into same direction (71) From driveway, across path (72) From driveway, turning into opposite direction (73) From driveway, intended path not known (74) From entrance to limited access highway (78) Encroachment by other vehicle—details unknown Pedestrian, Pedalcyclist, or Other Nonmotorist (80) Pedestrian in roadway (81) Pedestrian approaching roadway (82) Pedestrian—unknown location (83) Pedalcyclist or other nonmotorist in roadway (specify): (84) Pedalcyclist or other nonmotorist approaching roadway, (specify): (85) Pedalcyclist or other nonmotorist—unknown location (specify): Object or Animal (87) Animal in roadway
32		al Precrash Event 5 4	(88) Animal approaching roadway
JZ.	This (01) (02) (03)	Vehicle Loss of Control Due To: Blow out or flat tire Stalled engine Disabling vehicle failure (e.g., wheel fell off) (specify):	(89) Animal—unknown location (90) Object in roadway (91) Object approaching roadway (92) Object—unknown location (98) Other critical precrash event (specify):
		Non-disabling vehicle problem (e.g., hood flew up) (specify): Poor road conditions (puddle, pot hole, ice, etc.)	(99) Unknown
	(06)	(specify): Traveling too fast for conditions	
		Other cause of control loss (specify): Unknown cause of control loss	
	·		

4.0	
33. Attempted Avoidance Maneuver $\frac{\phi}{2}$	35. Pre-Impact Location4
(00) No driver present	(0) No driver present
(01) No avoidance maneuver	(1) Stayed in original travel lane
(02) Braking (no lockup)	(2) Stayed on roadway but left original travel lane
(03) Braking (lockup)	(3) Stayed on roadway, not known if left original
(04) Braking (lockup unknown)	travel lane
(05) Releasing brakes	(4) Departed roadway
(06) Steering left	(5) Remained off roadway
(07) Steering right	(6) Returned to roadway
(08) Braking and steering left	(7) Entered roadway
(09) Braking and steering right	(9) Unknown
(10) Accelerating	
(11) Accelerating and steering left	61
(12) Accelerating and steering right	36. Accident Type
(98) Other action (specify):	(Note: Applicable codes on back of this
	page)
(99) Unknown	(00) No impact
•	Code the number of the diagram that best
	describes the accident circumstance
34. Pre-Impact Stability 2	(98) Other accident type (specify):
(0) No driver present	
(1) Tracking	(99) Unknown
(2) Skidding longitudinally—rotation less than 30	
degrees	
(3) Skidding laterally—clockwise rotation	
(4) Skidding laterally—counterclockwise rotation	
(7) Other vehicle loss-of-control (specify):	
(9) Precrash stability unknown	
•	

STOP HERE IF GV07 DOES NOT EQUAL 01 - 49

	OCCUPANT RELATED	44. Vehicle Cargo Weight 9, 9 9 0
37.	Driver Presence in Vehicle	Code weight to nearest
	(0) Driver not present (1) Driver present	(000) Less than 5 kilograms (450) 4,500 kilograms or more
	(9) Unknown	(999) Unknown
38.	Number of Occupants This Vehicle ϕ	lbs X .4536 =, kgs
	(00-96) Code actual number of occupants for this vehicle	Source:ROLLOVER DATA
	(97) 97 or more (99) Unknown	
20		45. Rollover (00) No rollover (no overturning) φ φ
33.	Number of Occupant Forms Submitted $\underline{\psi} \underline{\psi}$ AIR BAG RELATED	Rollover (primarily about the longitudinal axis)
40		(01-16) Code the number of quarter turns (17) Rollover, 17 or more quarter turns (specify):
40.	Is this an AOPS Vehicle? (0) No (includes unknown) (1) Yes - researcher determined	(98) Rolloverend-over-end (i.e., primarily about
	(2) VIN determined air bag system	the lateral axis)
	 (2) VIN determined air bag system (3) VIN determined automatic (passive) belts (4) VIN determined air bag and automatic (passive) 	
	belts	46. Rollover Initiation Type (00) No rollover
41.	Air Bag(s) Deployment, First Seat Frontal	(01) Trip-over (02) Flip-over
	(0) Not equipped or not available (1) No air bags deployed	(03) Turn-over (04) Climb-over
	Single Air Bag Vehicle	(05) Fall-over
	(2) Driver air bag deployed (3) Driver air bag, unknown if deployed	(06) Bounce-over (07) Collision with another vehicle
	Multiple Air Bag Vehicle	(08) Other rollover initiation type specify):
	(4) Driver side only deployed(5) Passenger side only deployed	(98) Rollover-end-over-end (99) Unknown rollover initiation type
	(6) Driver and passenger side deployed(7) Driver and passenger side unknown if	
	deployed	47. Location of Rollover Initiation (0) No rollover (1) On roadway
	(8) Air bag(s) deployed, details unknown(9) Unknown	(1) On roadway (2) On shoulder—payed
42.	Air Bag(s) Deployment, Other Than First	(2) On shoulder—paved (3) On shoulder—unpaved (4) On roadside or divided trafficway median
	Seat Frontal	(8) Rollover-end-over-end
	(0) Not equipped with an "other" air bag(1) Deployed during accident (as a result of impact)	
	(2) Deployed inadvertently just prior to accident	48. Rollover Initiation Object Contacted (Note: Applicable codes on back of page)
	 (3) Deployed, details unknown (4) Deployed as a result of a noncollision event 	49. Location on Vehicle Where Initial Principal
	during accident sequence (e.g., fire, explosion, electrical)	Tripping Force Is Applied
	(5) Unknown if deployed (7) Nondeployed	(1) Wheels/tires
	(9) Unknown	(2) Side plane (3) End plane (4) Undercarriage
	Specify type of "other" air bag present:	(4) Undercarriage (5) Other location on vehicle (specify):
		(6) Non-contact rollover forces (specify):
	VEHICLE WEIGHT ITEMS	(8) Rolloverend-over-end (9) Unknown
43	. Vehicle Curb Weight / 6 2 0	50. Direction of Initial Roll
70	Code weight to nearest	(0) No rollover (1) Roll right - primarily about the longitudinal axis
	10 kilograms. (045) Less than 450 kilograms	(2) Roll left - primarily about the longitudinal axis (8) Rolloverend-over-end
	(610) 6,100 kilograms or more (999) Unknown	(9) Unknown roll direction
	lbs X .4536 = 1, 6 14 kgs	
	Source:	

CODES FOR ROLLOVER INITIATION OBJECT CONTACTED

(00) No rollover (01-30) — Vehicle Number	(57) Fence (58) Wall
Noncollision	(59) Building (60) Ditch or culvert
(31) Turn-over — fall-over	(61) Ground
(32) No rollover impact initiation (end-over-end)	(62) Fire hydrant
(34) Jackknife	(63) Curb
. ,	(64) Bridge
Collision With Fixed Object	(68) Other fixed object (specify):
(41) Tree (< 10 cm in diameter)	(=) = and an exposit (epochiy).
(42) Tree (> 10 cm in diameter)	(69) Unknown fixed object
(43) Shrubbery or bush	(,
(44) Embankment	Collision with Nonfixed Object
	(70) Passenger car, light truck, van, or other vehicle
(45) Breakaway pole or post (any diameter)	not in-transport
	(71) Medium/heavy truck or bus not in-transport
Nonbreakaway Pole or Post	(76) Animal
(50) Pole or post (≤ 10 cm in diameter)	(77) Train
(51) Pole or post (> 10 cm but ≤ 30 cm in diameter)	(78) Trailer, disconnected in transport
(52) Pole or post (> 30 cm in diameter)	(79) Object fell from vehicle in-transport
(53) Pole or post (diameter unknown)	(88) Other nonfixed object (specify):
(54) Concrete traffic barrier (55) Impact attenuator	(89) Unknown nonfixed object
(56) Other traffic barrier (includes guardrail)	(98) Other event (specify):
(specify):	
	(99) Unknown event or object

OVERRIDE/UNDERRIDE (THIS VEHICLE)	ACCIDENT RECONSTRUCTION PROGRAMS
51. Front Override/Underride (this Vehicle)	HIGHEST DELTA V
52. Rear Override/Underride (this Vehicle) (0) No override/underride, or not an end-to-end impact between two CDS applicable vehicles, and no medium/heavy truck or bus underride	58. Basis for Total (Resultant) Delta V (highest) (00) No vehicle inspection
Override (see specific CDC) [Between 2 CDS applicable vehicles (Bodytype, GV07=1-49)] (1) 1st CDC (2) 2nd CDC (3) Other not automated CDC (specify): Underride (see specific CDC) [Between 2 CDS applicable vehicles (Bodytype, GV07=1-49)] (4) 1st CDC (5) 2nd CDC (6) Other not automated CDC (specify):	Delta V Calculated (01) Reconstruction program -damage only routine (02) Reconstruction program -damage and trajectory routine (03) Missing vehicle algorithm Delta V Not Calculated (04) At least one vehicle (which may be this vehicle) is beyond the scope of an acceptable reconstruction program, regardless of collision conditions.
 (7) Medium/heavy truck or bus override (of any configuration) (9) Unknown HEADING ANGLE AT IMPACT FOR HIGHEST DELTA V 	All vehicles within scope (CDC applicable) of reconstuction program but one of the collision conditions is beyond the scope of the reconstruction program or other acceptable reconstruction technique, regardless of adequacy of damage data.
Values: (000)-(359) Code actual value (997) Noncollision (998) Impact with object (999) Unknown	(05) Rollover (06) Other non-horizontal forces (07) Sideswipe type damage (08) Severe override
53. Heading Angle For This Vehicle 2 9 6	(09) Yielding object (10) Overlapping damage
54. Heading Angle For Other Vehicle 495	(11) All vehicle and collision conditions are within
RECONSTRUCTION DATA 55.Towed Trailing Unit (0) No towed unit (1) Yes—towed trailing unit (9) Unknown	scope of one of the acceptable reconstruction programs, but there is insufficient data available, (98) Other, (specify):
56. Documentation of Trajectory Data for This Vehicle (0) No (1) Yes	
 57. Post Collision Condition of Tree or Pole (For Highest Delta V) (0) Not collision (for highest delta V) with tree or pole (1) Not damaged (2) Cracked/sheared (3) Tilted <45 degrees (4) Tilted ≥45 degrees (5) Uprooted tree (6) Separated pole from base (7) Pole replaced (8) Other (specify): (9) Unknown 	

COMPUTER GENERAT	TED CRASH SEVERITY
59. Total Delta V	Highest 63. Impact Speed ——————————————————————————————————
Nearest kmph (secondary) (NOTE:000 means greater than -0.5 kmph and less than +0.5 kmph) (±160) ±159.5 kmph and above (999) Unknown Highest 61. Lateral Component of Delta V	64. Confidence In Reconstruction Program Results (For Highest Delta V) (0) No reconstruction (1) Collision fits model — results appear reasonable (2) Collision fits model — results appear high (3) Collision fits model — results appear low (4) Borderline reconstruction — results appear reasonable
Nearest kmph (highest) Nearest kmph (secondary) (NOTE:000 means greater than -0.5 kmph and less than +0.5 kmph) (±160) ±159.5 kmph and above (_999) Unknown 62. Energy Absorption	Highest 65. Barrier Equivalent Speed Q 9 7 QL.7 Nearest kmph (highest) Nearest kmph (secondary) (NOTE: 000 means less than 0.5 kmph) (160) 159.5 kmph and above (999) Unknown
IS MISSING VEHICLE ALGORITHM APPLICA	BLE FOR THIS VEHICLE? []YES []NO

IF YES: IS A COMPLETED PROGRAM SUMMARY INCLUDED? [] YES [] NO

66. Estimated Highest Delta V (Researcher Determined) (0) Reconstruction Delta V coded Estimated Delta V (1) Less than 10 kmph (2) ≥ 10 kmph but < 25 kmph (3) ≥ 25 kmph but < 40 kmph (4) ≥ 40 kmph but < 55 kmph Other estimates of damage severity (6) Minor (7) Moderate (8) Severe (9) Unknown	ESTIMATED DELTA V	VEHICLE INSPECTION
	Determined) (0) Reconstruction Delta V coded Estimated Delta V (1) Less than 10 kmph (2) ≥ 10 kmph but < 25 kmph (3) ≥ 25 kmph but < 40 kmph (4) ≥ 40 kmph but < 55 kmph (5) ≥ 55 kmph Other estimates of damage severity (6) Minor (7) Moderate (8) Severe	(0) No inspection (1) Vehicle fully repaired-no damage evident (2) Partial inspection (specify):

*** IF THE CDS APPLICABLE VEHICLE WAS NOT INSPECTED (I.E., GV67=0), ***

DO NOT COMPLETE THE EXTERIOR AND INTERIOR VEHICLE FORMS

*** IF GV07 DOES NOT EQUAL 01-49, DO NOT COMPLETE ***

THE EXTERIOR VEHICLE, INTERIOR VEHICLE,

OCCUPANT ASSESSMENT, AND OCCUPANT INJURY FORMS.

	Department of Transportations // Traffic Safety		KTERIO	R VEH	ICLE	FORM	1 N			ΓSAMPLIN	
	ry Sampling Unit Nur Number - Stratum		B /	7	3. Vehic	le Numb	er			_#	
			VEHICLE	IDENT	IFICA	TION					
VIN	P 4 G H	4 4	R /	RX					Model \	Year	94
Vehicle Ma	ike (specify):	PLY MOUT	}/		Vehicle I	Model (s _l	pecify):	GRANC			
				OCAT			110				
Locate the undamage	e end of the damage ed axle for side impac	with respect	to the vehic	cle longitu	ıdinal ce	enter line	or bump	er corn	er for en	id impac	ts or an
Specific Impa	act No. Location	of Direct Dama	ge		Locatio	on of Field	L		Location	of Max Cru	ısh
,	RF BUMPE	L CORNER			RF	BUMPE	L COLNE	z c	26	/ * * * * * * * * * * * * * * * * * * *	
			SH PROF				*******				
F ii e	Measure C1 to C6 fro Free space value is d ndividual C locations etc. Record the value Use as many lines/co	lefined as the . This may ir e for each C-	e distance be nclude the fo -measureme	etween th ollowing: ent and m	ne baseli bumper naximum	ine and t lead, bu crush.	the originates the control of the co	al body e er, side בתעוני	contour t	taken at on, side	the
Specific Impact Number	Plane of Impact C-Measurements	Width (CDC)	Damage Max Crush	Field	C ₁	C ₂	C ₃	C ₄	C ₅	C ₆	±D
	(65)										
	BUMPER	≈ 46	54.6	62.2	9.0	18.4	34.Ø	42.¢	52.4	54.0	+8.1
				†							
,	(METRIC)	., «				1					
/	BUMPER	116.8	137.1	157.9	22.9	45.1	86.4	106.7	133.0	137.1	+20.5
			 	†						<u> </u>	
		 	ļ	 	<u> </u>	<u> </u>					

	VEHICLE DAMAGE SKETCH	
TIRE—WHEEL DAMAGE 3. Rotation physically b. Tire restricted deflated RF \(\frac{1}{2} \) RR \(\frac{2}{2} \) LR \(\frac{2}{2} \) (1) Yes (2) No (8) NA (9) Unk.	ORIGINAL SPECIFICATIONS Wheelbase 303 cm Overall Length 490 cm Maximum Width 177 cm Curb Weight 155 cm	WHEEL STEER ANGLES (For locked front wheels or displaced rear axles only) RF ② 3 Ø o LF ± o RR ± o LR ± o Within ± 5 degrees
TYPE OF TRANSMISSION ☐ Manual (X Automatic END SHIFT ≥ 10 CM ☐ Yes (X No	Rear Overhang <u>85</u> cm Undeformed End Width <u>158</u> cm Engine Size: cyl./displ. <u>3.3としい</u> L	DRIVE WHEELS FWD RWD 4WD Approximate Cargo Weight / kg
	MEASUREMENTS IN CENTIMETERS	
	Original Bumper height	
	Bumper corner Stringline	Bumper corner Stringline
1 marceus h	Bumper corner Stringline	Bumper corner Stringline

NOTES: Sketch new perimeter and cross hatch direct damage and single hatch induced damage on all views. Annotate observations which might be useful in reconstructing the accident (e.g., grass in tire bead, direction of striations, scuff on sidewalls, etc.). If pulling trailer, sketch type of trailer and damage received on the back of this page.

Annotate any damage caused by extrication such as component removal by torching, prying, or hydraulic shears.

					С	DC V	NORKSHE	E	T				
	CODES FOR OBJECT CONTACTED												
	(01-30)	— Vehi	cle Nuı	mber			(57		Fence				
	A1 10 1						(58		Wall				
	Noncollision						(59		Building				
	(31) Overturn — rollover (excludes end-over-end)							Ditch or	culvert				
				d-over-end			(61		Ground				
				ion			(62		Fire hydr	ant			
	(34)	Jackkr					(63	3)	Curb				
	(35)	Other i	intrauni	it damage (specify	/) :		(64		Bridge				
	(2.0)						(68	3)	Other fixe	ed object (sp	ecify):		
	(36) (38)	Nonco Other I	llision II noncoll	njury lision (specify):			(69	9)	Unknow	n fixed object		T-17844-	
	(39)	Nonco	llision -	— details unknown	1					nfixed Object			
										er car, light ti	ruck, van, or	other vehicl	е
	Collision						-		not in-tra	insport			
				n in diameter)			(71	1)	Medium/	heavy truck o	or bus not in-	transport	
				n in diameter)			(72	2)	Pedestria	an ´		•	
		Shrubb					(73	3)	Cyclist or	r cycle			
	(44)	Embar	ıkment	•			(74	4)	Other no	nmotorist or	conveyance		
	(45)	Breaka	away po	ole or post (any dia	ameter)				Vehicle o				_
	• •				,		(76		Animal				
	Nonbrea	akaway	Pole of	r Post			(77		Train				
	(50)	Pole of	r post (≤ 10 cm in diamet	er)				Trailer, disconnected in transport				
	(51)	Pole or	r post (> 10 cm but ≤ 30 c	cm in di:	amete	er) (79			ell from vehic		rt	
	(52)	Pole or	r post (> 30 cm in diamete	ter)		(88			nfixed object		•	
	(53)	Pole or	r post (d	diameter unknown	1) _		`	•					
	(54)	Concre	ete traff	fic barrier			(89))	Unknowr	n nonfixed ob	ject		_
	(55) (56)	Impact Other t	: attenu :raffic b	lator Parrier (includes gu	ıardrail)		(98	3)	Other eve	ent (specify):			
	()	(specif	y):	- (morado ga			(99	})	Unknown event or object				_
		<u> </u>							···		····		
				DEFORMA	TION C	LASS	SIFICATION BY	ΥE	VENT NU	JMBER			
	A : 4			(4) (6)					(4)	(5)			
	Accident Event			(1) (2)	l		(2)		Specific	Specific	<u>(6)</u>	(==)	
	Sequence	. 01	bject	Direction of Force	Increm Value		(3) Deformation		ngitudinal r Lateral	Vertical or	Type of	(7)	
	Number		ntacted	(degrees)	Shi		Location		cation	Lateral Location	Damage Distribution	Deformation Extent	
-							Locatori		.ocadori		Distribution	Extent	_
_	<u>φ 1</u>		<u>z</u>	5	4	4			2	E	w	<u> Ø 7</u>	
_					<u> </u>								
													
_													
_								-					.
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_													
_													.
_					 -								.
		- —											

	COLLISION DEFORMATION CLASSIFICATION						
HIGHEST	DELTA "V"	-(0.04.1)					
Accident Event Sequence Number	Object Contacted	(1) (2) Direction of Force	(3) Deformation Location	(4) Longitudinal or Lateral Location	(5) Vertical or Lateral Location	(6) Type of Damage Distribution	(7) Deformation Extent
4. <u>Φ</u> <u>/</u>	5. Ø Z	6	7. <u> </u>	8. <u>Z</u>	9. <u>E</u>	10	11. 47
Second Hi	ighest Delta "V"						
12	_ 13	. 14	_ 15	16	17	18	19
		CRUS	SH PROFILE	IN CENTIM	ETERS		
	The crush p	rofile for the dar propriate space	amage described below. (ALL ME	in the CDC(s) a EASUREMENTS	bove should be	documented (IMETERS.)	
HIGHEST	DELTA "V"						
20. L	21. 				C ₅	C ₆	22. ±D
158	<u> </u>	946	086	107 1	32 /	<u>37</u> -	421
Second Hi	ighest Delta "V"						
23. L	24. C ₁				C ₅ (C ₆	25. ±D
						+ 	
(Coded impact (250) (998)	250 centimeters No highest seve	severity impact.) arest centimeter		(650)	I Wheelbase Code to the nea centimeter 650 centimeters Unknown inches X 2		3 4 3
27. Direct E (For hig (250)	Damage Width ghest severity im Code to theneard 250 centimeters	rest centimeter	117	(185)	I Average Track \ Code to the near centimter 185 centimeters Unknowninches X 2	arest	155

			FUEL SYSTEM
30.	Are CDCs Documented but Not Coded on The		35. Location of Fuel Tank-1 Filler Cap
	Automated File?		36. Location of Fuel Tank-2 Filler Cap (0) No fuel tank
	(0) No (1) Yes		(1) On back plane
	(1) 165		(2) Aft of center of the rear wheels (rear axle) on left side plane
31.	Researcher's Assessment of Vehicle	1	(3) Aft of center of the rear wheels (rear axle) on
	Disposition		right side plane (4) Forward of center of the rear wheels (rear axle)
	(0) Not towed due to vehicle damage		on left side plane
	(1) Towed due to vehicle damage(9) Unknown		(5) Forward of center of the rear wheels (rear axle) on right side plane
	(3, 5, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,		(6) Over the center of the rear wheels (rear axle) on left side plane
32.	Is This A Multi-Stage Manufactured Vehicle	4	(7) Over the center of the rear wheels (rear axle)
	And/Or A Certified Altered Vehicle?		on right side plane (8) Other (specify):
	(0) No post manufacturer modifications(1) Yes - post manufacturer modifications		(8) Other (specify):(9) Unknown
	(specify):		
		-	37. Type of Fuel Tank-1
	(Include photograph of CERTIFICATION		38. Type of Fuel Tank-2 (0) No fuel tank (electrical vehicle)
	PLACARD in case report)		(1) Metallic
	(9) Unknown if vehicle is modified		(2) Non-metallic
			(9) Unknown
	FIRE OCCURRENCE		39. Location of Fuel Tank-1 9 40. Location of Fuel Tank-2
33.	Fire Occurrence	ø	40. Location of Fuel Tank-2 (0) No fuel tank
•	(0) No fire		(1) Aft of center of the rear wheels (rear axle) centered
	Yes, fire occurred		(2) Aft of center of the rear wheels (rear axle) left
	(1) Minor		side (3) Aft of center of the rear wheels (rear axle) right
	(2) Major (9) Unknown		side
	(c) Chalowi		(4) Forward of center of the rear wheels (rear axle) centered
34.	Origin of Fire (0) No fire	4	(5) Forward of center of the rear wheels (rear axle) left side
	(1) Vehicle exterior (front, side, back, top)		(6) Forward of center of the rear wheels (rear axle) right side
	(2) Exhaust system		(7) Over center of the rear wheels (rear axle)
	(3) Fuel tank (and other fuel retention system parts)		(8) Other (specify):(9) Unknown
	(4) Engine compartment		(b) Chikhowh
	(5) Cargo/trunk compartment		41. Damage to Fuel Tank-1
	(6) Instrument panel(7) Passenger compartment area		42. Damage to Fuel Tank-2
	(8) Other location (specify):		(0) No fuel tank (1) No damage to fuel tank
			(2) Deformed, no seam failure
	(9) Unknown		(3) Deformed, with a seam failure
			(4) Punctured (5) Lacerated (ripped)
			(6) Abraded (scraped)
			(7) Filler neck separation from the fuel tank(8) Other damage (specify):
			(9) Unknown
			1

43.	Leakage Location of Fuel System-1	
44.	Leakage Location of Fuel System-2	Two Fuel Tanks? (0) No (one or two tanks only)
	(0) No fuel tank (1) No fuel leakage	Vac Mars Than Two Taulus
	(1) No luei leakage	Yes - More Than Two Tanks
	Primary Area Of Leakage	(1) Yes – <u>no damage</u> to any tank or filler cap and <u>no fuel system leakage</u>
	(2) Tank	(2) Yes – <u>no damage</u> to any tank or filler
	(3) Filler neck	cap but there is fuel system leakage
	(4) Cap	(specify leakage location):
	(5) Lines/pump/filter	(specify leakage location).
	(6) Vent/emission recovery	(3) Yes damage to an additional tank or
	(8) Other (specify):	filler cap and there is fuel system leakage
	(9) Unknown	(specify the following):
	(-)	Type of tank
		Tank location
45.	Fuel Type-1 4 /	Filler cap location
		Tank damage
46.	Fuel Type-2 4 4	Location of leakage
		Type of fuel
	Single Fuel Type	Type of fuel
	(00) No fuel tank	
	(01) Gasoline	
	(02) Diesel	
	(03) CNG (Compressed Natural Gas)	COMMENTS
	(04) LPG (Liquid Petroleum Gas) also	
	known as Propane	
	(05) LNG (Liquid Natural Gas)	+
	(06) Methanol (M100 or M85)	
	(07) Ethanol (E100 or E85)	
	(08) Other (Hydrogen or others) (specify):	
	Electric Powered or Electric/Solar	
	Powered Vehicles	
	(10) Lead Acid Battery	
	(11) Nickel-Iron Battery	
	(12) Nickel-Cadmium Battery	
	(13) Sodium Metal Chloride Battery	
	(14) Sodium Sulfur Battery	
	(18) Other (Specify):	
	(98) Other Hybrid (specify):	
	(99) Unknown fuel type	
	(30) Similarii idoi type	
	*** STOP: IF THE CDS APPLICA	BLE VEHICLE WAS NOT TOWED ***
	O.G. II THE OBOTAT EIOA	SEE VEHICLE TYMO HOT TOVVED

*** STOP: IF THE CDS APPLICABLE VEHICLE WAS NOT TOWED ***

(GV10=0)

DO NOT COMPLETE THE INTERIOR VEHICLE FORM.

Highway Traffic Safety

	Administration	K VEHICLE FOR
	Primary Sampling Unit Number	Type of Windo
	2. Case Number - Stratum AB /	15. WS 9 16
	3. Vehicle Number	20. BL 9 21.
	INTEGRITY	
	(00) No integrity loss Yes, Integrity Was Lost Through (01) Windshield (02) Door (side) (03) Door/hatch (back door) (04) Roof (05) Roof glass (06) Side window (07) Rear window (backlight) (08) Roof and roof glass	(0) No glazir (1) AS-1 — (2) AS-2 — (3) AS-3 — (4) AS-2 — (5) AS-3 — (6) AS-14 — (7) Glazing i (8) Other (s) (9) Unknowr Window Precra
	(09) Windshield and door (side) (10) Windshield and roof	23. WS <u>/</u> 24
	(11) Side and rear window (side window and backlight) (12) Windshield and side window (13) Door and side window (98) Other combination of above (specify): (99) Unknown	28. BL
	Door, Tailgate or Hatch Opening	(9) Unknowr
	5. LF / 6. RF 3 7. LR 6 8. RR 9 9. TG/H	Glazing Dama 31. WS 2 32
	(0) No door/gate/hatch (1) Door/gate/hatch remained closed and operational (2) Door/gate/hatch came open during collision (3) Door/gate/hatch jammed shut (8) Other (specify): (9) Unknown	36. BL
	Damage/Failure Associated with Door, Tailgate or Opening in Collision. If IV05-IV09 ≠ 2, Then code Ø	Hatch (7) Glazing r (9) Unknowr
	10. LF <u>4</u> 11. RF <u>4</u> 12. LR <u>4</u> 13. RR <u>4</u> 14. TG/ł	-I Glazing Dama
	(0) No door/gate/hatch or door not opened	39. WS 40
	Door, Tailgate or Hatch Came Open During Collision (1) Door operational (no damage)	44. BL <u>/</u> 45.
	(2) Latch/striker failure due to damage	(0) No glazir (1) No occup
	(3) Hinge failure due to damage (4) Door structure failure due to damage	(2) Glazing (
	(5) Door support (i.e., pillar, sill, roof side rail,	(3) Glazing i (4) Glazing i
	etc.) failure due to damage (6) Latch/striker and hinge failure due to damage	(5) Glazing of
	(8) Other failure (specify):	contact a (6) Glazing c contact
U	(2) =::::::::::::::::::::::::::::::::::::	(7) Clazina i

GLAZING

w/Windshield Glazing . LF <u>9</u> 17. RF <u>9</u> 18. LR <u>9</u> 19. RR 9 Roof Φ 22. Other $\underline{9}$

- Laminated
- Tempered
- Tempered-tinted (original)
- Tempered-with after market tint
- Tempered-tinted (with additional after market tint)
- Glass/Plastic
- removed prior to accident
- pecify):

ash Glazing Status

. LF <u>2</u> 25. RF <u>9</u> 26. LR <u>9</u> 27. RR <u>9</u>

Roof ϕ 30. Other ϕ

- opened
- ned
- emoved prior to accident

ge from Impact Forces

. LF<u>/</u> 33. RF <u>6</u> 34. LR <u>9</u> 35. RR **6**

Roof <u>\$\phi\$</u> 38. Other <u>\$\frac{\textit{9}}\$</u>

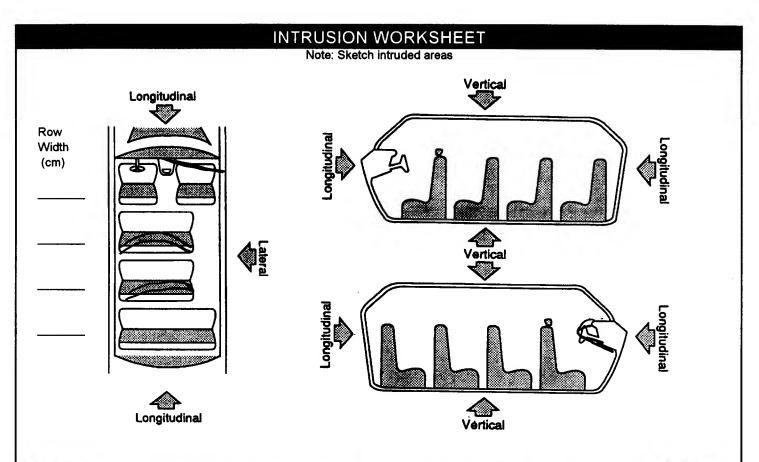
- ng damage from impact forces
- n place and cracked from impact forces
- n place and holed from impact forces
- out-of-place (cracked or not) and not holed from impact
- out-of-place and holed from impact forces
- disintegrated from impact forces
- removed prior to accident
- n if damaged

ge from Occupant Contact

). LF / 41. RF 9 42. LR 9 43. RR 9

Roof **4** 46. Other **9**

- pant contact to glazing
- contacted by occupant but no glazing damage
- n place and cracked by occupant contact
- n place and holed by occupant contact
- out-of-place (cracked or not) by occupant nd not holed by occupant contact
- out-of-place by occupant contact and holed by occupant
- (7) Glazing removed prior to accident
- (8) Glazing disintegrated by occupant contact
- (9) Unknown if contacted by occupant



LOCATION OF INTRUSION	INTRUDED COMPONENT	COMPARISON INTE	s Are In Centimeters) RUDED INTRUSION ALUE =	DOMINANT CRUSH DIRECTION
municoloru	OOM ONLIN	— — — — — — — — — — — — — — — — — — —	=	BIRESTION
			=	
			=	
		_	=	
		_	2	
		_	=	
			=	
		_	=	
		_	=	
			=	
		-	=	
		_	#	
		_	=	
		_	=	
			=	

OCCUPANT AREA INTRUSION

Note: If no intrusions, leave variables IV47-IV86 blank.

1401	Note. If no intrusions, leave variables 1V47-1V86 blank.			
	Location of Intrusion	Intruding Component	Magnitude of Intrusion	Dominant Crush Direction
1st	47. <u>/</u> 3	48. <u> </u>	2 4	502_
2nd	51. <u>/</u> 3	52. 46	53. 9	54
3rd	55. / 3	56/_8	579	58. 2
4th	59. 2 2	60	_ 61. <u>_</u> 9	62. <u></u>
5th	63. 2 3	64	_ 65. <u></u> 9	66
6th	67. <u>3</u> }	68	_ 69. <u>_</u> 9	70
7th	71	72	73	74
8th	75	76	_ 77	78
9th	79	80	_ 81	82
10th	83	84	_ 85	86

LOCATION OF INTRUSION

Front Seat (11) Left (12) Middle (13) Right

Fourth Seat (41) Left (42) Middle (43) Right

Second Seat (21) Left (22) Middle (23) Right

(97) Catastrophic (98) Other enclosed area (specify)

Third Seat (31) Left

(32) Middle (33) Right

(99) Unknown

INTRUDING COMPONENT

Interior Components

(01) Steering assembly

(02) Instrument panel left

(03) Instrument panel center

(04) Instrument panel right

(05) Toe pan

(06) A (A1/A2)-pillar

(07) B-pillar

(08) C-pillar

(09) D-pillar

(10) Side panel - forward of the A1/A2-pillar

(11) Door panel (side)

(12) Side panel - rear of the B-pillar

(13) Roof (or convertible top)

(14) Roof side rail

(15) Windshield

(16) Windshield header

(17) Window frame

(18) Floor pan (includes sill)

(19) Backlight header

(20) Front seat back

(21) Second seat back

(22) Third seat back

(23) Fourth seat back (24) Fifth seat back

(25) Seat cushion

(26) Back door/panel (e.g., tailgate)

(27) Other interior component (specify):

Exterior Components

(30) Hood

(31) Outside surface of this vehicle (specify):

(32) Other exterior object in the environment (specify):

(33)Unknown exterior object

(97) Catastrophic

(98) Intrusion of unlisted component(s) (specify):

(99) Unknown

MAGNITUDE OF INTRUSION

(1) ≥ 3 centimeters but < 8 centimeters

(2) ≥ 8 centimeters but < 15 centimeters

(3) ≥ 15 centimeters but < 30 centimeters (4) ≥ 30 centimeters but < 46 centimeters

(5) ≥ 46 centimeters but < 61 centimeters

(6) ≥ 61 centimeters

(7) Catastrophic

(9) Unknown

DOMINANT CRUSH DIRECTION

(1) Vertical

(2) Longitudinal

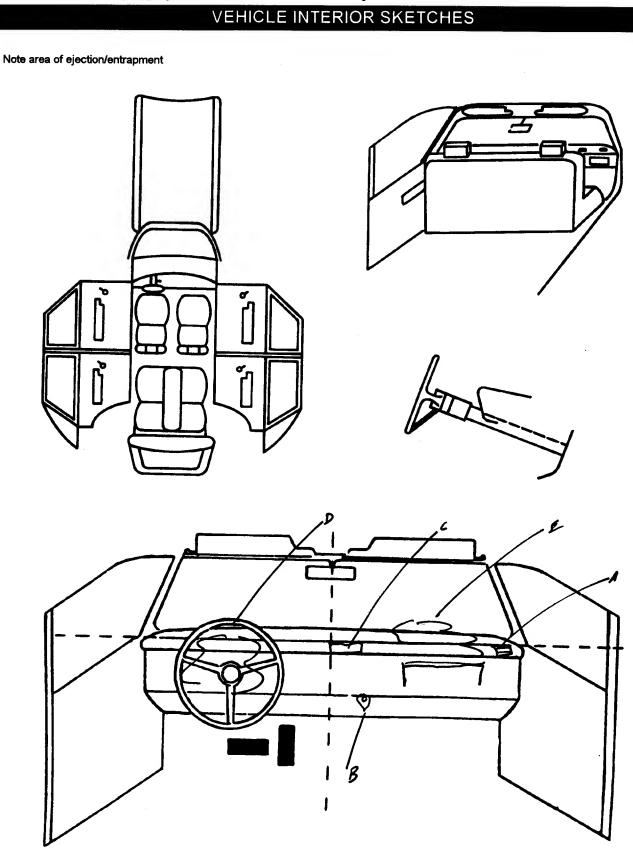
(3) Lateral

(7) Catastrophic

(9) Unknown

ST	EERING	RIM/SPOKE DEF	ORMATIO	NO
	(All	Measurements Are in Centime	ters)	
COMPARISON VALUE		DAMAGE VALUE	=	DEFORMATION
	_		=	
			=	
	_		=	
April 1990 and 1990			=	
•				

	STEERING COLUMN	INSTRUMENT PANEL
87.	Steering Column Type (1) Fixed column (2) Tilt column (3) Telescoping column	92. Odometer Reading kilometers Code to the nearest 1,000 kilometers (000) No odometer
	(4) Tilt and telescoping column (8) Other column type (specify): (9) Unknown	(000) No odometer (001) Less than 1,500 kilometers (500) 499,500 kilometers or more (999) Unknown
88.	Tilt Steering Column Adjustment (0) No tilt steering column (1) Full up (2) Between full up and center (3) Center (4) Between center and full down (5) Full down (9) Unknown	93. Instrument Panel Damage from Occupant Contact? (0) No (1) Yes (9) Unknown
89.	Telescoping Steering Column Adjustment (0) No telescoping steering column (1) Full back (2) Between full back and midpoint (3) Midpoint (4) Between midpoint and full forward (5) Full forward (9) Unknown	94. Type of Knee Bolster Covering (0) No knee bolster (1) Padded (2) Rigid plastic (8) Other (specify): (9) Unknown 95. Knee Bolsters Deformed from Occupant Contact? (0) No knee bolster (1) No deformation (2) Yes - deformation (9) Unknown
90.	Steering Rim/Spoke Deformation Code actual measured deformation to the nearest centimeter (00) No steering rim deformation (01-14) Actual measured value in centimeters (15) 15 centimeters or more (98) Observed deformation cannot be measured (99) Unknown	96. Did Glove Compartment Door Open During Collision(s)? (0) No glove compartment door (1) No - door did not open (2) Yes - door opened (9) Unknown 97. Adaptive (Assistive) Driving Equipment (0) No adaptive driving equipment
91.	Location of Steering Rim/Spoke Deformation (00) No steering rim deformation Quarter Sections	(1) Adaptive driving equipment installed (Check all that apply.) [] Hand controls for braking/acceleration [] Steering control devices (attached to OEM steering wheel
	(01) Section A (02) Section B (03) Section C (04) Section D Half Sections	 [] Steering knob attached to steering wheel [] Low effort power steering (unit or device) [] Replacement steering wheel (i.e., reduced diameter) [] Joy-stick steering controls [] Wheelchair tie-downs
	(05) Upper half of rim/spoke (06) Lower half of rim/spoke (07) Left half of rim/spoke (08) Right half of rim/spoke (09) Complete steering wheel collapse	[] Modification to seat belts (specify): [] Additional or relocated switches (specify): [] Raised roof [] Wall-mounted head rest (used behind
	(10) Undetermined location (99) Unknown	wheelchair) [] Other adaptive device (specify): (9) Unknown



Sketch windshield contact(s) and the damaged area(s) on the instrument panel outline (e.g., radio, glove compartment, damage to instrument panel structure.

Cross hatch contact points, draw spider webs or use other annotation as may be appropriate.

Annotate the contacted area with a letter (begin with A) and list on the Points of Occupant Contact page.

		POI	NTS OF OC	CUPANT CONTACT	
Contact	Interior Component Contacted	Occupant No. If Known	Body Region If Known	Supporting Physical Evidence	Confidence Level of Contact Point
Α	412	42	R. 140+0	VENT RSHED IN WARD	2
В	411	ΦZ	L. FOUT	CIRCULAL IM PRESSION	3
С	411	~	-	DENTED	-
D	174	Ø 1	HEAD	DEROVED	а
E	186	42	FACE	DEPLOYED	1
F					
G					
Н					
l					
J					
K					
Ĺ		··			
М					
N		, 			
RONT 001) Windshie 002) Mirror 003) Sunvisor	ld	LEFT SIDE	DES FOR INT		rear window) torage rack,

(004) Steering wheel rim (005) Steering wheel hub/spoke excluding hardware or armrests Steering wheel (combination of codes 004 and 005) (006)(052) Left side hardware or armrest (053)Left A (A1/A2)-pillar (007) Steering column,transmission (054) Left B-pillar selector lever, other (055)Other left pillar (specify): attachment Left side window glass (800)Cellular telephone or CB radio (056)(009)Add on equipment(e.g., (057) Left side window frame tapedeck, air conditioner) (058) Left side window sill (010)(059) Left instrument panel and Left side window glass below including one or more of the (011) Center instrument panel and following: frame, window sill, A (A1/A2)-pillar, B-pillar, or below (012) Right instrument panel and roof side rail. (060) Other left side object below (013)Glove compartment door (specify): Knee bolster (014) (015) Windshield including one or more of the following: front RIGHT SIDE header, A (A1/A2)-pillar, (101) Right side interior surface, instrument panel, mirror, or excluding hardware or steering assembly (driver side armrests (102) Right side hardware or only) (016) Windshield including one or armrest more of the following: front (103) Right A (A1/A2)-pillar header, A (A1/A2)-pillar, (104) Right B-pillar instrument panel, or mirror (105) Other right pillar (specify): (passenger side only) Windshield reinforced by (017) (106) Right side window glass (107) exterior object, (specify): Right side window frame (108) Right side window sill (019) Other front object (specify): (109) Right side window glass including one or more of the

following: frame, window sill, A (A1/A2)-pillar, B-pillar, or

console

parking brake

Parking brake handle Foot controls including

(253)

roof side rail.
(110) Other right side object (specify):

	JOHN GIVEIVIO	KEAK	
	_	(301)	Backlight (rear window)
NTERIC		(302)	Backlight storage rack,
	Seat, back support		door, etc.
(152)	Belt restraint webbing/buckle	(303)	Other rear object (specify):
(153)	Belt restraint B-pillar or door		
` '	frame attachment point		
(154)		ADAP	TIVE (ASSISTIVE) DRIVING
(,	component (specify):		PMENT
	component (opeony).		Hand controls for
(155)	Head restraint system	(401)	braking/acceleration
(160)		(402)	
(100)	Other occupants (specify).	(402)	Steering control devices
(404)	1.4.1.1		(attached to OEM steering
(161)			wheel)
(162)	Child safety seat (specify):	(403)	Steering knob attached to
			steering wheel
(163)	Other interior object (specify):	(405)	Replacement steering wheel
			(i.e., reduced diameter)
		(406)	Joy stick steering controls
AIR B	AG	(407)	Wheelchair tie-downs
(170)	Air bag-driver side	(408)	Modification to seat belts,
(175)		` ,	(specify):
` '	cover-driver side		"
(180)	Air bag-passenger side	(409)	Additional or relocated
(185)		(/	switches, (specify):
` '	cover-passenger side		, (,)
(190)	Other air bag (specify)	(410)	Raised roof
(,	Cinc. In Day (openin)	(411)	Wall mounted head rest (used
(195)	Other air bag compartment	(411)	behind wheel chair)
(150)	cover (specify)	(412)	Other adaptive device
	cover (specify)	(412)	
			(specify):
ROOF	=		
(201)		*	
(202)	Rear header		
(203)			
	Roof right side rail		
(205)	Roof or convertible top		
FLOC	OR .		
(251)	Floor (including toe pan)		
(252)	Floor or console mounted		
\ <i>y</i>	transmission lever, including		

CONFIDENCE LEVEL OF

CONTACT POINT

Certain

Probable Possible Unknown

(1)

(2) (3)

		IV	IANUAL RESTI	RAINTS		0.5.00	1000
NOTES	Encode the applicable data for a systems should be assessed du If a Child safety seat is present,	each sea iring the v	t position in the vehicle inspection then	e. The attribute fo	or the vacupant A	ariable Assess	may be found below. Restr ment Form.
	If the vehicle has automatic rest			. •	ne hack	of the	nrevious nage
	ii tre venice nas attendate rest	all to ava	Left	Cen		OI tile	Right
	Availability		4	OCII	<u> </u>		
F	Evidence of usage		<u> </u>		/		4
ı	Used in this crash?			 			
R S	Proper Use	-		 			
Ť	Failure Modes			 			
	Anchorage Adjustment	1		 / 			
	Availability		4	9			4
c	Evidence of usage		<u> </u>	 			7
ØECOZC	Used in this crash?	1					
C	Proper Use						
Ň	Failure Modes						
U	Anchorage Adjustment		1				,
	Availability		4				4
0	Evidence of usage						
T	Used in this crash?						
H E	Proper Use						
Ŕ	Failure Modes						
	Anchorage Adjustment						1
(0) (1) (2) (3)	(Active) Belt System Availability None available Belt removed/destroyed Shoulder belt Lap belt Lap and shoulder belt	(0) (1) (2)	Jse of Manual (Active) E None used or not avail Belt used properly Belt used properly with Used Improperly	able		strnent No sh No up	pper Anchorage noulder belt oper anchorage adjustment for der belt
(5) Integ (6) (7) (8)	Belt available - type unknown rai Belt Partially Destroyed Shoulder belt (lap belt destroyed/removed) Lap belt (shoulder belt destroyed/removed) Other belt (specify):	(3) (4) (5) (6) (7) (8)	Shoulder belt worn und Shoulder belt worn belt Belt worn around more Lap belt worn on abdoi Lap belt or lap and sho improperly with child so (specify): Other improper use of system (specify):	ind back or seat than one person nen ulder belt used afety seat	(2) (3) (4) (5) (9)	Anche In full In mid In full Positi Unkne	table shoulder Belt Upper orage up position I position down position on unknown own if position has adjustable anchorage adjustment
(00)	(Active) Belt System Use None used, not available, or belt removed/destroyed		Unknown (Active) Belt Failure Mo	des During			
(01) (02) (03) (04) (05) (08) (12)	Inoperable (specify): Shoulder belt Lap belt Lap and shoulder belt Belt used - type unknown Other belt used (specify): Shoulder belt used with child safety seat	(0) (1) (2) (3) (4) (5)	No manual belt used of No manual belt failure(Torn webbing (stretche included) Broken buckle or latch, Upper anchorage sepa Other anchorage sepal (specify):	not available s) d webbing not plate rated			
(13)	Lap belt used with child safety seat Lap and shoulder belt used with child safety seat	(6) (7)	Broken retractor Combination of above (specify):			

(8)

(9)

Unknown

Other manual belt failure (specify):

(15)

(18)

(99)

unknown

(specify):______ Unknown if belt used

Belt used with child safety seat - type

Other belt used with child safety seat

AUTOMATIC RESTRAINTS

NOTES: Encode the data for each applicable front seat position. The attribute for the variables may be found below. Restraint systems should be assessed during the vehicle inspection then coded on the Occupant Assessment Form.

AIR BAGS

		Left Front	Right Front	Other
F	Availability/Function		1	
Ŕ	Deployment	1	1	
T	Failure	1	1	

Air Bag System Availability/Function

- (0) Not equipped/not available
- (1) Air bag

Non-functional

- (2) Air bag disconnected (specify):
- (3) Air bag not reinstalled
- (9) Unknown

Are There Indications of Air Bag System Failure? (This Occupant Position)

- (0) Not equipped/not available
- No (1)
- Yes (specify):
- (9) Unknown

Frontal Air Bag System Deployment (This Occupant Position)

- (0) Not equipped/not available
- (1) Deployed during accident (as a result of impact)
- Deployed inadvertently just prior to accident

sequence

- (3) Deployed, accident undetermined
- (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)
- Unknown if deployed
- Nondeployed
- Unknown

Air Bag(s) Deployment, Other Than First Seat Frontal (This Occupant Position)

- (0) Not equipped with an "other" air bag
- (1) Deployed during accident (as a result of impact)
- Deployed inadvertently just prior to accident
- (3) Deployed, details unknown
- (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)
- Unknown if deployed
- Nondeployed
- Unknown

AUTOMATIC BELTS

	·	Left	Right
	Availability/Function		
F	Use		
Ŕ	Туре		
S	Proper Use	,	
	Failure Modes		

Automatic (Passive) Belt System Availability/Function

- (0) Not equipped/not available
- (1) 2 point automatic belts
- 3 point automatic belts
- (3) Automatic belts type unknown

Non-functional

- (4) Automatic belts destroyed or rendered inoperative
- (9) Unknown

Automatic (Passive) Belt System Use

- (0) Not equipped/not available/destroyed or rendered inoperative
- (1) Automatic belt in use
- (2) Automatic belt not in use (manually disconnected, motorized track inoperative)
- (3) Automatic belt use unknown
- (9) Unknown

Automatic (Passive) Belt System Type

- (0) Not equipped/not available
- (1) Non-motorized system
- (2) Motorized system
- (9) Unknown

Proper Use of Automatic (Passive) Belt System

- (0) Not equipped/not available/not used
- (1) Automatic belt used properly
- Automatic belt used properly with (2) child safety seat

Automatic Belt Used Improperty

- (3) Automatic shoulder belt worn under
- Automatic shoulder belt worn behind back
- (5) Automatic belt worn around more than one person
- Lap portion of automatic belt worn on abdomen
- (7) Automatic lap and shoulder belt or

automatic shoulder belt used with child safety seat (specify):

- Other improper use of automatic belt system (specify):
- Unknown

Automatic (Passive) Belt Failure Modes **During Accident**

- (0) Not equipped/not available/not in use
- (1) No automatic belt failure(s)
- Torn webbing (stretched webbing not included)
- Broken buckle or latchplate
- (4) Upper anchorage separated
- (5) Other anchorage separated (specify):
- Broken retractor
- Combination of above (specify):
- Other automatic belt failure (specify):
- (9) Unknown

FIRST SEAT FRONTAL AIR BAGS

NOTES: Encode the applicable data for the driver and first seat passenger in the vehicle. The attribute for the variable may be found below. Restraint systems should be assessed during the vehicle inspection then coded on the Occupant Assessment Form.

	Driver	Passenger
Type of air bag?	/	/
Flaps open at tear points?	2	2
Flaps damaged?	9	9
Air bag damaged?	9	9
Source of air bag damage	G	9
Air bag tethered?	9	9
Air bag have vent ports?	9	9
Other occupant contact air bag?	9	9
Occupant wearing eyewear?	9	9

Type of Air Bag

- (0) Not equipped/not available
- (1) Original manufacturer installed system
- (2) Retrofitted air bag
- (3) Replacement air bag
- (8) Unknown type of air bag
- (9) Unknown

Did Air Bag Module Cover Flap(s) Open At Designated Tear Points?

- (0) Not equipped/not available
- (1) No
- (2) Yes
- (3) Deployed, unknown if flap(s) opened at designated tear points
- 7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

Were Air Bag Module Cover Flap(s) Damaged?

- (0) Not equipped/not available
- (1) No
- (2) Yes (specify):
- (3) Deployed, unknown if air bag module cover flap(s) damaged
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

Was There Damage To The Air Bag?

- (00) Not equipped/not available
- (01) Not damaged

Yes - Air Bag Damage

- (02) Ruptured
- (03) Cut
- (04) Torn
- (05) Holed
- (06) Burned
- (07) Abraded
- (88) Other damage (specify):
- (95) Damaged, details unknown
- (96) Deployed, unknown if damaged
- (97) Not deployed
- (98) Unknown if deployed
- (99) Unknown

Source of Air Bag Damage

- (00) Not equipped/not available
- (01) Not damaged
- (02) Object worn by occupant, (specify):
- (03) Object carried by occupant, (specify):
- (04) Adaptive/assistive controls, (specify):
- (05) Fire in vehicle
- (06) Thermal burns
- (07) Rescue or emergency efforts
- (88) Other damage source (specify):
- (95) Damaged, unknown source
- (96) Deployed, unknown if damaged
- (97) Not deployed
- (98) Unknown if deployed
- (99) Unknown

Was The Air Bag Tethered?

- (0) Not equipped/not available
- (1) No
- (2) Yes (specify number of tether straps):
- (3) Deployed, unknown if tethered
- 7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

Did The Air Bag Have Vent Ports?

- 0) Not equipped/not available
- (1) No
- (2) Yes (specify number of vent ports):
- (3) Deployed, unknown if vent ports present
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

Was the Air Bag in this Occupant's Position Contacted by Another Occupant?

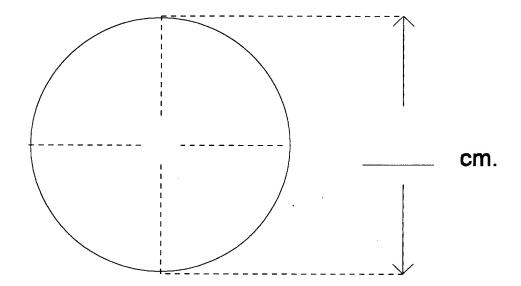
- (0) Not equipped/not available
- (1) No
- (2) Yes (specify):
- (3) Deployed, unknown if other occupant contact to air bag
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

Was This Occupant Wearing Eye-wear?

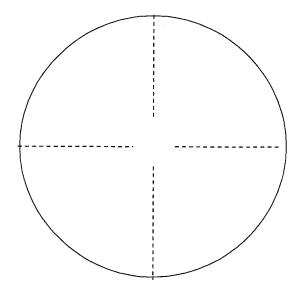
- (0) Not equipped/not available
- (1) No
- (2) Eyeglasses/sunglasses
- (3) Contact lenses
- (4) Deployed, unknown if eyewear worn
- (7) Not deployed
- (8) Unknown if deployed
- (9) Unknown

DRIVER AIR BAG DAMAGE AND CONTACT SKETCHES

1. SKETCH DAMAGE AND CONTACT EVIDENCE ON DRIVER AIR BAG (Front)



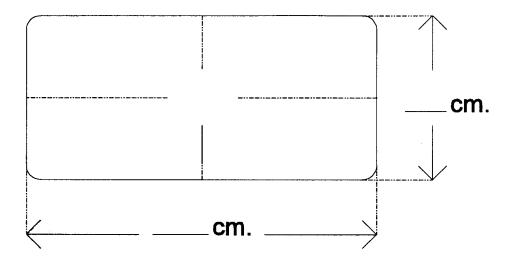
2. SKETCH DAMAGE AND CONTACT EVIDENCE ON DRIVER AIR BAG (Back)



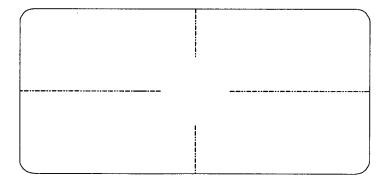
DRIVER AIR BAG S	SKETCHES (Cont'd)
3. DRIVER AIR BAG MODULE COVER FLAP SIZE (DOUBLE) a. Upper Flap width (W _U) width (W _L) height (H _U) height (H _L) H _L H _L W _L	
4. SKETCH OF OTHER TYPE OF AIR BAG MODULE FLAP AND SIZE	5. SKETCH OF OTHER TYPE OF AIR BAG VENT PORTS
	6. SKETCH LOCATION OF CIRCULAR AIR BAG VENT PORTS 11 12 1 2 9 3 8 4 7 6 5

PASSENGER AIR BAG DAMAGE AND CONTACT SKETCHES

1. SKETCH DAMAGE AND CONTACT EVIDENCE ON PASSENGER AIR BAG (Front)



2. SKETCH DAMAGE AND CONTACT EVIDENCE ON PASSENGER AIR BAG (Back)



PASSENGER AIR BAG	G SKETCHES (Cont'd)
3. PASSENGER AIR BAG MODULE COVER FLAP SIZE (SINGLE) a. Flap width (W) height (H) H	4. PASSENGER AIR BAG MODULE COVER FLAP SIZE (DOUBLE) a. Upper Flap width (W _U) height (H _U) W H H H H H H H H H H H H
5. SKETCH OF OTHER TYPE OF AIR BAG MODULE FLAP AND SIZE	6. SKETCH OF OTHER TYPE OF AIR BAG VENT PORTS
	7. SKETCH LOCATION OF RECTANGULAR AIR BAG VENT PORTS 10 11 12 1 2 9 3 8 7 6 5 4

"C	DTHER" AIR BAG DAMAGE A	AND CONTACT SKETCHES	
1. SKETCH DAMAGE AND CO	NTACT EVIDENCE ON "OTHER"	AIR BAG (Front)	
2. SKETCH DAMAGE AND CO	NTACT EVIDENCE ON "OTHER"	AIR BAG (Back)	
,			

	"OTHER" AIR BAG SKETCHES (Cont'd)
3.	SKETCH AIR BAG MODULE FLAP AND SIZE OR OPENING FOR AIRBAG
4.	SKETCH AIR BAG VENT PORTS

HEAD RESTRAINTS/SEAT EVALUATION

NOTES: Encode the applicable data for each seat position in the vehicle. The attribute for these variables may be found at the bottom of the page. Head restraint type/damage and seat type/performance should be assessed during the vehicle inspection then coded on the Occupant Assessment Form.

		Left	Center	Right
	Head Restraint Type/Damage			/
F	Seat Type	42		92
I R	Seat Performance	9		9
S	Seat Orientation	1		1
Т	Seat Track Position	9		9
	Seat Back Incline Pre/Post Impact		/	
	Head Restraint Type/Damage	9	9	9
c	Seat Type	45	05	45
SEC	Seat Performance	9	9	9
0	Seat Orientation	1	1	1
N D	Seat Track Position	9	9	9
	Seat Back Incline Pre/Post Impact			
	Head Restraint Type/Damage	Ø	4	4
Т	Seat Type	45	45	45
Ĥ	Seat Performance	9	9	9
Ŕ	Seat Orientation	1	,	1
D	Seat Track Position	9	7	9
	Seat Back Incline Pre/Post Impact			
	Head Restraint Type/Damage			
O T	Seat Type			
H	Seat Performance			
E R	Seat Orientation			
	Seat Track Position		,	
	Seat Back Incline Pre/Post Impact			

DESCRIBE ANY INDICATION OF ABNORMAL OCCUPANT POSTURE (I.E., UNUSUAL OCCUPANT CONTACT PATTERN)

HEAD RESTRAINTS/SEAT EVALUATION

Head Restraint Type/Damage by Occupant at This Occupant **Position**

- (0) No head restraints
- Integral no damage Integral damaged during accident
- (3) Adjustable no damage(4) Adjustable damaged during accident

Seat Type (this Occupant Position)

Bucket with folding back

Bench with separate back

Bench with folding back(s)

Pedestal (i.e., column

(10) Box mounted seat (i.e., van

Other seat type (specify):

Split bench with separate back

Split bench with folding back(s)

Occupant not seated or no seat

- (5) Add-on no damage(6) Add-on damaged during accident
- Other Specify):

(01)

(02)

(03)

(04)

(05)

(06)

(80)

(09)

(99)

(9) Unknown

Bucket

Bench

cushions

cushions

supported)

type)

Unknown

Seat Performance (this Occupant Position)

- (0) Occupant not seated or no seat
- No seat performance failure(s)
- Seat adjusters failed
- Seat back folding locks or "seat back" failed (specify):
- Seat tracks/anchors failed
- Deformed by impact of occupant
- Deformed by passenger compartment intrusion (specify):
- (7) Combination of above (specify):
- (8) Other (specify):
- (9) Unknown

Seat Orientation (this Occupant

- Occupant not seated or no seat
- Forward facing seat
- Rear facing seat

- (8) Other (specify):
- (9) Unknown

Position)

- Side facing seat (inward) Side facing seat (outward)

Seat Track Adjusted Position Prior To **Impact**

- Occupant not seated or no seat
- (1) Non-adjustable seat track

Adjustable Seat Track

- Seat at forward most track position
- (2) Seat at forward most track positi (3) Seat between forward most and middle track positions
- Seat at middle track position
- Seat between middle and rear most track positions
- Seat at rear most track position
- Unknown

Seat Back Incline Prior and Post **Impact**

- Occupant not seated or no seat (00)
- (01) Not adjustable

Upright prior to impact

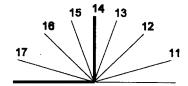
- $(11)^{-}$ Moved to completely rearward position
- Moved to rearward midrange (12)position
- (13)Moved to slightly rearward position
- (14) Retained pre-impact position
- Moved to slightly forward position (15)
- (16) Moved to forward midrange position
- (17)Moved to completely forward position

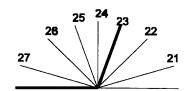
Slightly reclined prior to impact

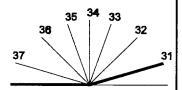
- Moved to completely rearward (21)position
- (22)Moved to rearward midrange position
- (23)Retained pre-impact postion
- (24) Moved to upright position
- (25) Moved to slightly forward position
- (26) Moved to forward midrange position
- Moved to completely forward (27)position

Completely reclined prior to impact

- Retained pre-impact position
- (32) Moved to rearward midrange position
- (33)Moved to slightly rearward position
- (34)
- Moved to upright position Moved to slightly forward position (35)
- (36) Moved to forward midrange position
- (37)Moved to completely forward position
- (99)Unknown







Coding diagrams for Seat Back Incline Position Prior and Post Impact

DESCRIBE ANY INDICATION OF ABNORMAL OCCUPANT POSTURE (I.E., UNUSUAL OCCUPANT CONTACT PATTERN)

	CHILD SAFETY	Y SEAT FIELD ASSESSMENT
		ccupant's number in the first row and complete the column below the Complete a column for each child safety seat present.
c	Occupant Number	
1	. Type of Child Safety Seat	
2	. Child Safety Seat Orientation	
3	. Child Safety Seat Harness Usage	
4	. Child Safety Seat Shield Usage	
5	. Child Safety Seat Tether Usage	
6	. Child Safety Seat Make/Model	Specify Below for Each Child Safety Seat
2	(0) No child safety seat (1) Infant seat (2) Toddler seat (3) Convertible seat (4) Booster seat (7) Other type child safety seat (specify): (8) Unknown child safety seat type (9) Unknown if child safety seat used Child Safety Seat Orientation (00) No child safety seat Designed for Rear Facing for This Age/Weight (01) Rear facing (02) Forward facing	 Child Safety Seat Shield Usage Child Safety Seat Tether Usage Note: Options Below Are Used for Variables 3-5. (00) No child safety seat Not Designed with Harness/Shield/Tether (01) After market harness/shield/tether added, not used (02) After market harness/shield/tether used (03) Child safety seat used, but no after market harness/shield/tether added (09) Unknown if harness/shield/tether added or used Designed With Harness/Shield/Tether
	(08) Other orientation (specify): (09) Unknown orientation Designed for Forward Facing for This Age/Weight (11) Rear facing (12) Forward facing (18) Other orientation (specify):	(11) Harness/shield/tether not used (12) Harness/shield/tether used (19) Unknown if harness/shield/tether used Unknown If Designed With Harness/Shield/Tether (21) Harness/shield/tether not used (22) Harness/shield/tether used (29) Unknown if harness/shield/tether used
	(19) Unknown orientation Unknown Design or Orientation For This Age/Weight, or Unknown Age/Weight (21) Rear facing (22) Forward facing (28) Other orientation (specify):	Child Safety Seat Make/Model (Specify make/model and occupant number)
	(29) Unknown orientation	• · · · · · · · · · · · · · · · · · · ·
	(99) Unknown if child safety seat used	

vehicle. Code the appropriate of	esearcher has any indication that an occupardata on the Occupant Assessment Form. [] and body parts involved in partial ejection(s):		
Occupant Number Ejection (Note on Vehicle Interior Sketch) Ejection Area			
Ejection Medium Medium Status			
Ejection (1) Complete ejection (2) Partial ejection (3) Ejection, Unknown degree (9) Unknown Ejection Area (1) Windshield (2) Left front (3) Right front (4) Left rear (5) Right rear (6) Rear	(7) Roof (8) Other area (e.g., back of pickup, etc.) (specify): (9) Unknown Ejection Medium (1) Door/hatch/tailgate (2) Nonfixed roof structure (3) Fixed glazing (4) Nonfixed glazing (specify):	(5) Integral structure (8) Other medium (specify): (9) Unknown Medium Status (Immediately Prior to Impact) (1) Open (2) Closed (3) Integral structure (9) Unknown	
	/es[] m:		



National Highway Traffic Safety Administration	NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM
Primary Sampling Unit Number	OCCUPANT'S SEATING
2. Case Number - Stratum AB 16	10. Occupant's Seat Position // / / / / / / / / / / / / / / / / /
3. Vehicle Number	(11) Left side
	(13) Right side
4. Occupant Number OCCUPANT'S CHARACTERISTICS 5. Occupant's Age Code actual age at time of accident. (00) Less than one year old (specify by month): (97) 97 years and older (99) Unknown 6. Occupant's Sex (1) Male (2) Female-not reported pregnant (3) Female-pregnant-1st trimester(1st-3rd month) (4) Female-pregnant-2nd trimester(4th-6th month) (5) Female-pregnant-term unknown (9) Unknown 7. Occupant's Height Code actual height to the nearest centimeter. (999) Unknown 7. Inches X 2.54 = / 9 / centimeters 8. Occupant's Weight Code actual weight to the nearest kilogram. (999) Unknown 2	(12) Middle (13) Right side (14) Other (specify):

EJE	CTION/E	NTRAPMENT
12. Ejection (0) No ejection (1) Complete ejection (2) Partial ejection (3) Ejection, unknown degree (9) Unknown	<u> </u>	15. Medium Status (Immediately Prior To Impact) ψ (0) No ejection (1) Open (2) Closed (3) Integral structure (9) Unknown
13. Ejection Area (0) No ejection (1) Windshield (2) Left front (3) Right front (4) Left rear (5) Right rear (6) Rear (7) Roof (8) Other area (e.g., back of pickup, etc.) (specify): (9) Unknown	4	16. Entrapment
14. Ejection Medium (0) No ejection (1) Door/hatch/tailgate (2) Nonfixed roof structure (3) Fixed glazing (4) Nonfixed glazing (specify): (5) Integral structure (8) Other medium (specify): (9) Unknown	4	 (1) Removed from vehicle while unconscious or disoriented (2) Removed from vehicle due to injuries (3) Exited vehicle with some assistance (4) Exited vehicle under own power (5) Occupant fully ejected (9) Unknown

BELT SYSTEM FUNCTION							
18. Manual (Active) Belt Sy (0) None available (1) Belt removed/dest (2) Shoulder belt (3) Lap belt (4) Lap and shoulder (5) Belt available—typ	royed	4	() () ()	(0) No: (1) No: Adjustab (2) In fu (3) In m	r Belt Upper Anchorage shoulder belt upper anchorage adjus ale shoulder Belt Upper all up position hid position	tment for shoulde	_ 5 r belt
Integral Belt Partially De (6) Shoulder belt (lap	estroyed belt destroyed/removed) belt destroyed/removed) belt destroyed/removed) stem Use railable, or belt d fy):	4	23. A F () () () () () () () () () ((4) In ft (5) Pos (9) Unk and Automat Function (0) Not (1) 2 po (2) 3 po (3) Auto (1) Automat (4) Automat (9) Unk (4) Automat (0) Not	all down position ition unknown nown if position has achorage adjustment ic (Passive) Belt System equipped/not available int automatic belts int automatic belts matic belts - type unknotional ematic belts destroyed derative	m Availability/ nown or rendered	4
(18) Other belt used wi (specify): (99) Unknown if belt used (0) None used or not a (1) Belt used properly (2) Belt used properly (3) Shoulder belt worn (4) Shoulder belt worn (5) Belt worn around m (6) Lap belt or lap and	child safety seat belt used with child d safety seat—type unknow the child safety seat sed. Active) Belts vailable with child safety seat under arm behind back or seat ore than one person shoulder belt used d safety seat (specify):	wn 9	25. A () () () () () () () () () (1) Auto disco (spe (spe (spe (spe (spe (spe (spe (spe	matic belt in use imatic belt not in use (nonnected, motorized tracify): matic belt use unknownown ic (Passive) Belt Systemequipped/not available motorized system prized system nown lse of Automatic (Passive)	ive) //not used //ly with // under arm // under arm // under than elt worn	4
21. Manual (Active) Belt Fail During Accident (0) No manual belt use (1) No manual belt failu (2) Torn webbing (stret included) (3) Broken buckle or la (4) Upper anchorage se (5) Other anchorage se (6) Broken retractor (7) Combination of abo (8) Other manual belt for	d or not available ure(s) ched webbing not tchplate eparated eparated (specify): ve (specify):		27. A	with 8) Other (spe 9) Unking A Ouring A O) Not of 1) No a 2) Torn 3) Brok 4) Uppo 5) Other 6) Brok 7) Com	ic (Passive) Belt Failure ccident equipped/not available intomatic belt failure(s) webbing (stretched webbing of latchplate er anchorage separated en retractor bination of above (speer automatic belt failure	ify): matic belt system e Modes /not in use ebbing not include d (specify):	4

POLICE REPORTED RESTRAINT USE	AIR BAG SYSTEM FUNCTION
28. Police Reported Belt Use (0) None used (1) Police did not indicate belt use (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt used, type not specified (6) Child safety seat (7) Automatic belt (8) Other type belt, (specify):	30. Frontal Air Bag System Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag Non-functional (2) Air bag disconnected (specify): (3) Air bag not reinstalled (9) Unknown
(9) Police indicated "unknown" 29. Police Reported Air Bag Availability/Function (0) No air bag available (1) Police did not indicate air bag availability/function (2) Deployed (3) Not deployed (4) Unknown if deployed (9) Police indicated "unknown"	31. Frontal Air Bag System Deployment (This Occupant Position) (0) Not equipped/not available (1) Deployed during accident (as a result of impact) (2) Deployed inadvertently just prior to accident (3) Deployed, details unknown (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (5) Unknown if deployed (7) Nondeployed (9) Unknown
Check the Primary Source Used In Determining Belt Use. [] Not equipped/not available/destroyed or rendered inoperative [] Vehicle inspection [] Official injury data [] Driver/occupant interview [] Other (specify):	32. Other Than First Seat Frontal Air Bag Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag Non-functional (2) Air bag disconnected (specify): (3) Air bag not reinstalled (9) Unknown Specify type of "other" air bag present:
	 33. Air Bag(s) Deployment, Other Than First Seat Frontal (This Occupant Position) (0) Not equipped with an "other" air bag (1) Deployed during accident (as a result of impact) (2) Deployed inadvertently just prior to accident (3) Deployed, details unknown (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (5) Unknown if deployed (7) Nondeployed (9) Unknown 34. Are There Indications of Air Bag System Failure? (This Occupant Position) (0) Not equipped/not available (1) No (2) Yes (specify): (9) Unknown

FIRST SEAT FRONTAL AIR	BAG SYSTEM EVALUATION
35. Had Vehicle Been in Previous Accident(s)? (0) Not equipped/not available (1) No previous accidents Yes (2) Previous accident(s) without deployment(s) (3) One previous accident with deployment (4) More than one previous accident with at least one deployment (8) Previous accidents, unknown deployment status (9) Unknown	40. Longitudinal Component of Delta V For Air Bag Deployment Impact (-000) Not equipped/not available Code the value of the delta V for the impact that initiated the air bag deployment (-996) Deployment, unknown longitudinal Delta V (-997) Not deployed (-998) Unknown if deployed (-999) Unknown
36. Type of Air Bag (0) Not equipped/not available (1) Original manufacturer installed system (2) Retrofitted air bag (3) Replacement air bag (8) Unknown type of air bag (9) Unknown	41. Did Air Bag Module Cover Flap(s) Open At Designated Tear Points? (0) Not equipped/not available (1) No (2) Yes (3) Deployed, unknown if flap(s) opened at designated tear points (7) Not deployed (8) Unknown if deployed (9) Unknown
37. Had Any Prior Maintenance/Service Been Performed On This Air Bag System? (0) Not equipped/not available (1) No prior maintenance (2) Yes, prior maintenance (specify): (9) Unknown 38. Air Bag Deployment Accident Event	42. Were Air Bag Module Cover Flap(s) Damaged? 9 (0) Not equipped/not available (1) No (2) Yes (specify): (3) Deployed, unknown if air bag module cover flap(s) damaged (7) Not deployed (8) Unknown if deployed (9) Unknown
Sequence Number (00) Not equipped/not available Code the accident event sequence number that initiated the air bag deployment (96) Deployed, unknown event (97) Not deployed (98) Unknown if deployed (99) Unknown 39. CDC For Air Bag Deployment Impact (0) Not equipped/not available	43. Was There Damage To The Air Bag? (00) Not equipped/not available (01) Not damaged Yes - Air Bag Damage (02) Ruptured (03) Cut (04) Torn (05) Holed (06) Burned
 (1) Highest delta V (2) Second highest delta V (3) Other non-coded delta V (specify): (6) Deployed, unknown event (7) Not deployed (8) Unknown if deployed (9) Unknown 	(07) Abraded (88) Other damage (specify): (95) Damaged, details unknown (96) Deployed, unknown if damaged (97) Not deployed (98) Unknown if deployed (99) Unknown

	FIRST SEAT FRONTAL AIR BAG SYSTEM EVALUATION continued	HEAD RESTRAINT AND SEAT EVALUATION
44.	Source of Air Bag Damage (00) Not equipped/not available (01) Not damaged (02) Object worn by occupant, (specify): (03) Object carried by occupant, (specify): (04) Adaptive/assistive controls, (specify): (05) Fire in vehicle (06) Thermal burns (07) Rescue or emergency efforts (08) Other damage source (specify): (95) Damaged, unknown source (96) Deployed, unknown if damaged (97) Not deployed	49. Head Restraint Type/Damage by Occupant at This Occupant Position (0) No head restraints (1) Integral—no damage (2) Integral—damaged during accident (3) Adjustable—no damage (4) Adjustable—damaged during accident (5) Add-on—no damage (6) Add-on—damaged during accident (8) Other (specify): (9) Unknown 50. Seat Type (this Occupant Position) (00) Occupant not seated or no seat (01) Bucket (02) Bucket with folding back
45.	(98) Unknown if deployed (99) Unknown Was The Air Bag Tethered? (0) Not equipped/not available (1) No (2) Yes (specify number of tether straps):	(03) Bench (04) Bench with separate back cushions (05) Bench with folding back(s) (06) Split bench with separate back cushions (07) Split bench with folding back(s) (08) Pedestal (i.e., column supported) (09) Box mounted seat (i.e., van type) (10) Other seat type (specify):
46.	(3) Deployed, unknown if tethered (7) Not deployed (8) Unknown if deployed (9) Unknown Did The Air Bag Have Vent Ports? (0) Not equipped/not available (1) No (2) Yes (specify number of vent ports):	(99) Unknown 51. Seat Orientation (this Occupant Position) (0) Occupant not seated or no seat (1) Forward facing seat (2) Rear facing seat (3) Side facing seat (inward) (4) Side facing seat (outward) (8) Other (specify):
	(3) Deployed, unknown if vent ports present (7) Not deployed (8) Unknown if deployed (9) Unknown Was the Air Bag in this Occupant's Position Contacted by Another Occupant? (0) Not equipped/not available	(9) Unknown 52. Seat Track Adjusted Position Prior To Impact (0) Occupant not seated or no seat (1) Non-adjustable seat track Adjustable Seat Track (2) Seat at forward most track position
	 (1) No (2) Yes (specify): (3) Deployed, unknown if other occupant contact to air bag (7) Not deployed (8) Unknown if deployed (9) Unknown 	 (3) Seat between forward most and middle track positions (4) Seat at middle track position (5) Seat between middle and rear most track positions (6) Seat at rear most track position (9) Unknown
	Was This Occupant Wearing Eye-wear? (0) Not equipped/not available (1) No (2) Eyeglasses/sunglasses (3) Contact lenses (4) Deployed, unknown if eyewear worn (7) Not deployed (8) Unknown if deployed (9) Unknown	

EAT EVALUATION continued

tu ti	Jilai 7	accident Sampling System-Crashworthiness Da HEAD RESTRAINT AND SI
53.	Seat	Back Incline Prior and Post Impact 9 9
	(00)	Occupant not seated or no seat
	(01)	Not adjustable
	Uprig	ht prior to impact
	(11)	Moved to completely rearward position
	(12)	Moved to rearward midrange position
	(13)	Moved to slightly rearward position
	(14)	Retained pre-impact position
	(15)	Moved to slightly forward position
	(16)	Moved to forward midrange position
	(17)	Moved to completely forward position
	Cliab	tly realized prior to impact

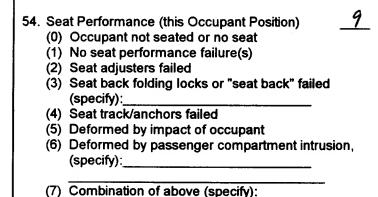
Slightly reclined prior to impact

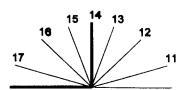
- (21) Moved to completely rearward position
- (22) Moved to rearward midrange position
- (23) Retained pre-impact position
- (24) Moved to upright position
- (25) Moved to slightly forward position
- (26) Moved to forward midrange position
- (27) Moved to completely forward position

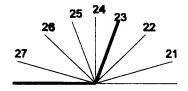
Completely reclined prior to impact

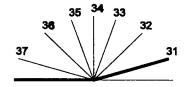
- (31) Retained pre-impact position
- (32) Moved to rearward midrange position
- (33) Moved to slightly rearward position
- (34) Moved to upright position
- (35) Moved to slightly forward position
- (36) Moved to forward midrange position
- (37) Moved to completely forward position
- (99) Unknown

(8) Other (specify): (9) Unknown









	С	HIL	D SAF	ETY	SE	AT		
	(000) No child safety seat		4	58.	Child	Safety Seat Harness Usage	4	4
	Applicable codes are found in your NASS CED at a Collection, Coding and Editing (950) Built-in child safety seat (997) Other make/model (specify):	os		59.	Child	Safety Seat Shield Usage	_4_	φ_
56.	(998) Unknown make/model (999) Unknown if child safety seat used Type of Child Safety Seat (0) No child safety seat (1) Infant seat		4	60.	Note Varia (00)	Safety Seat Tether Usage Options below applicable to bles OA58-OA60. No child safety seat Designed With Harness/Shield/Tether	_ _	<u></u>
1	(2) Toddler seat (3) Convertible seat (4) Booster seat - with shield (5) Booster seat - without shield (7) Other type child safety seat (specify): (8) Unknown child safety seat type (9) Unknown if child safety seat used	····-			(01) (02) (03) (09) Desig	After market harness/shield/tether added, not used After market harness/shield/tether us Child safety seat used, but no after m harness/shield/tether added Unknown if harness/shield/tether added or used gned With Harness/Shield/Tether		
	Child Safety Seat Orientation (00) No child safety seat Designed for Rear Facing for This Age/Weigh (01) Rear facing (02) Forward facing (08) Other orientation (specify):	4 ht	•		(12) (19) <i>Unkn</i> (21) (22) (29)	Harness/shield/tether not used Harness/shield/tether used Unknown if harness/shield/tether use own if Designed With Harness/Shield Harness/shield/tether not used Harness/shield/tether used Unknown if harness/shield/tether use	/Tethe	<i>∋r</i>
	Oesigned For Forward Facing for This Age/M 11) Rear facing 12) Forward facing 18) Other orientation (specify): 19) Unknown orientation Unknown Design or Orientation For This Age/Weight, or Unknown Age/Weight 21) Rear facing 22) Forward facing 23) Other orientation (specify): 29) Unknown orientation	Veigl	ht		(99)	Unknown if child safety seat used		

INJURY CONSEQUENCES	
61. Injury Severity (Police Rating) (0) O - No injury (1) C - Possible injury (2) B - Nonincapacitating injury (3) A - Incapacitating injury (4) K - Killed (5) U - Injury, severity unknown (6) Died prior to accident (9) Unknown 62. Treatment - Mortality	63. Type Of Medical Facility (for Initial Treatment) (0) Not treated at a medical facility (1) Trauma center (2) Hospital (3) Medical clinic (4) Physician's office (5) Treatment later at medical facility (8) Other (specify): (9) Unknown
(0) No treatment (1) Fatal (2) Fatal - ruled disease (specify): Nonfatal	(00) Not Hospitalized Code the number of days (up through 60) that the occupant stayed in hospital. (61) 61 days or more (99) Unknown
(3) Hospitalization (4) Transported and released (5) Treatment at scene - nontransported (6) Treatment later (7) Treatment - other (specify): (8) Transported to a medical facility-unknown if treated (9) Unknown	65. Working Days Lost Code the number of days (up through 60) that the occupant lost from work due to the accident (00) No working days lost (61) 61 days or more (62) Fatally injured (97) Not working prior to accident (99) Unknown

STOP WORK HERE

VARIABLES 66-74

	INJURY CONSEQUENCES	TRAUMA DATA
66	Time to Death Code number of hours from time of accident to time of death up through 24 hours. If time of death is greater than 24 hours, code number of days. (Note: 1 day = 31, 2 days = 32, n days = 30 +n up through 30 days = 60) Not fatal (96) Fatal - ruled disease (99) Unknown	71. Glasgow Coma Scale (GCS) Score (at Medical Facility) (00) Not injured (01) Injured - not treated at medical facility (02) No GCS Score at medical facility (03-15) Code the actual value of the initial GCS Score recorded at medical facility. (97) Injured, details unknown (99) Unknown if injured
	1st Medically Reported Cause of Death 4 4	72. Was the Occupant Given Blood? (1) No - blood not given (2) Yes - blood given
	2nd Medically Reported Cause of Death <u>φ</u> φ	(specify units):(9) Unknown if blood given
69.	3rd Medically Reported Cause of DeathCode the Occupant Injury from line number(s) for the medically reported injury(s) which reportedly contributed to this occupant's death (00) Not fatal or no additional causes (96) Mode of death given but specific injuries are not linked to cause of death. (specify):	73. Arterial Blood Gases (ABG) – HCO ₃ (00) Not injured (01) Injured, ABGs not measured or reported (02-50) Code the actual value of the HCO ₃ (96) ABGs reported, HCO ₃ unknown (97) Injured, details unknown (99) Unknown if injured
	(97) Other result (includes fatal ruled disease) (specify):	
	Number of Recorded Injuries for This OccupantCode the actual number of injuries recorded for this occupant. (00) No recorded injuries (97) Injured, details unknown (99) Unknown if injured	74. Primary Source of Belt Use Determination (0) Not equipped/not available/destroyed or rendered inoperative (1) Vehicle inspection (2) Official injury data (3) Driver/occupant interview (8) Other (specify): 121CE (9) Unknown if belt used

BEST AVAILABLE

Form Approved O.M.B. No. 2127-0021

National Highway Traffic Safety OCCUPANT INJURY FORM Administration

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

- 1. Primary Sampling Unit Number
- 3. Vehicle Number

41

2. Case Number - Stratum

AB

4. Occupant Number

41

INJURY DATA

Record below the actual injuries sustained by this occupant that were identified from the official and unofficial data sources. Remember not to double count an injury just because it was identified from two different sources. If greater than ten injuries have been documented, encode the balance on the Occupant Injury Supplement.

			A.I.S 90					Injury		Occupant
Source	<u> </u>	Type of	Specific					Source	Direct/	Area
of Injury	Body	Anatomic	Anatomic	Level of	A.I.S.		Injury	Confidence	Indirect	Intrusion
Data	Region	Structure	Structure	Injury	Severity	Aspect	Source	Level	Injury	Number

	Dala	Region	Structure	Structure	injury	Severny	Aspect	Source	Levei	injury	Number
1st	5. <u>7</u>	6_7	7. <u>5</u>	a. <u>/ 8</u>	9. <u>44</u>	10. 2	11.2 1	2 <u>444</u>	13.2	14.2	15. 4 \$
2nd	162	17. 7	181	<u>, 18</u>	20. 44	21.2	22 22 22	3. <u>4.04</u>	24	25.2	26. <u>\$ \$</u>
3rd	27 <u>.7</u>	28	29 <u> </u>	a. <u>/8</u>	at. <u>42</u>	32. <u>*</u>	33 3	4 <u>254</u>	35. <u>2</u>	36. 2	37. <u>44</u>
4th	38	39	40 4	1	42	43	44 4		46	47	48
5th	49	50	51 5	2	53	54	55 5	6	57	58	59
6th	60	61	62 6	3	64	65	66 6	7	68	69	70
7th	71	72	73 7	د	75	76	77 7	8. <u> </u>	79	80	81
8th	82	83	84 8	5	86	87	86 8		90:	91	92
9th	93	94	95 9	s	97	98	99: 10	o	101	102	103
10th	104	105 1	10510	7	108	109	110 11		112	1 13	114

OCCUPANT INJURY DATA								Occupan			
of	ource Injury Data	Body Region	Type of Anatomic Structure	Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect	Injury Source	Source Confidence Level	Direct/ Indirect Injury	Area Intrusion Number
lth .						_	_				
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OCCUPANT INJURY CLASSIFICATION

Body Region

- Head
- Face
- Neck
- (2) (3) (4) (5) (6) Thorax
- Abdomen
- Spine
- Upper Extremity
- (8) Lower Extremity
- Unspecified

Type of Anatomic Structure

- Whole Area
- Vessels
- (2) (3) (4) Nerves
- Organs (includes Muscles/ligaments)
- Skeletal (includes (5)
- joints) Head LOC
- (9) Skin

Specific Anatomic Structure

Vessels, Nerves, Organs, Bones, Joints are assigned consecutive two digit numbers beginning with 02.

The exceptions to this rule apply to:

Whole Area

- Skin Abrasion (02)
- Skin Contusion (04)
- (06)Skin - Laceration
- Skin Avulsion (80)
- (10) **Amoutation**
- (20)Burn
- (30)Crush
- (40) Degloving
- Injury NFS (50)
- Trauma, other than (90) mechanical

- Head LOC (02) Length of LOC
- (04) Level
- (06)of
- (08) Consciousness
- (10) Concussion

Spine

- (02)Cervical
- (04)Thoracic
- (06) Lumbar

Level of Injury

Specific injuries are assigned consecutive two-digit numbers beginning with 02.

To the extent possible, within the organizational framework of the AIS. 00 is assigned to an injury NFS as to severity or where only one injury is given in the dictionary for that anatomic structure. 99 is assigned to any injury NFS as to lesion or severity.

Abbreviated Injury Scale

- Minor Injury
- (2) (3) Moderate Injury
- Serious Injury
- Severe Injury Critical Injury
- (5) (6) Maximum
- (untreatable)
- lnjured, unknown severity

Aspect

- Right
- Left
- (2) (3) Bilateral
- (4) (5) Central
- Anterior
- (6)Posterior Superior
- (8) Inferior
- (9) Unknown
- (0)
 - Whole region

SOURCE OF INJURY DATA

OFFICIAL RECORDS

- (1) Autopsy records with or without hospital/medical records
- (2) Hospital/medical records other than emergency room (e.g., discharge summary)
- (3) Emergency room records only (including associated X-rays or other lab reports)
- (4) Private physician, walk-in or emergency clinic

UNOFFICIAL RECORDS

- (5) Lay coroner report
- (6) E.M.S. personnel
- (7) Interviewee
- (8) Other source (specify):
- (9) Police

DIRECT/INDIRECT INJURY

CONFIDENCE LEVEL

INJURY SOURCE

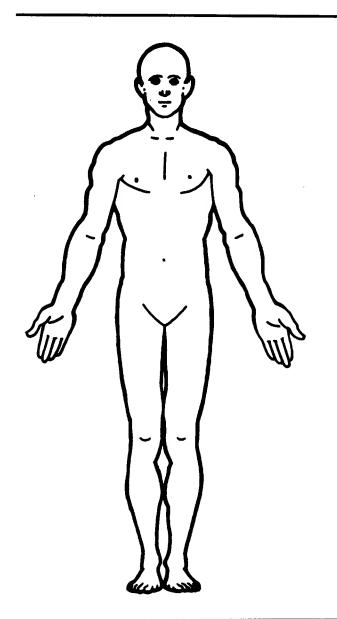
- (1) Certain
- Probable
- Possible
- (9) Unknown

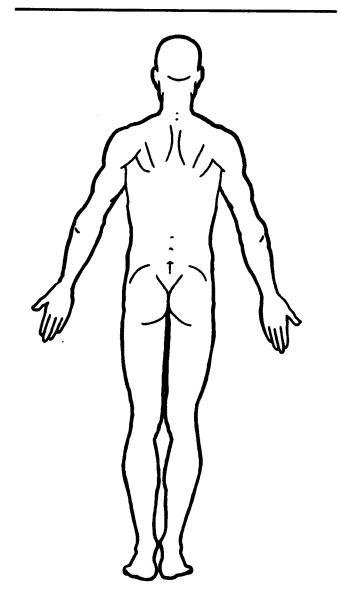
- Direct contact injury
- Indirect contact injury
- Noncontact injury
- Injured, unknown source

			N 12.13				
FRON		(102)	Right side hardware or	(183)	Air bag-passenger side and	(411)	Wall mounted head rest (use
(001)	Windshield		armrest		object held		behind wheel chair)
(002)	Mirror	(103)	Right A (A1/A2)-pillar	(184)	Air bag-passenger side and	(412)	•
(003)	Sunvisor	(104)	Right B-pillar	(405)	object in mouth		(specify):
(004)	Steering wheel rim	(105)	Other right pillar (specify):	(185)	•		
(005) (006)	Steering wheel hub/spoke	(406)	Dight side window slave	(496)	cover-passenger side	CVTC	DIOD (000) IDALITIC
(000)	Steering wheel (combination		Right side window glass	(186)	Air bag compartment		RIOR of OCCUPANT'S
(007)	of codes 004 and 005)	(107)	Right side window frame		cover-passenger side and	VEHIC	
(007)	Steering column, transmission selector lever, other	(108) (109)	Right side window sill Right side window glass	(107)	eyewear Air ber semmentment		Hood
	attachment	(105)	including one or more of the	(187)	• •	(452)	
(800)	Cellular telephone or CB radio		following: frame, window sill,		cover-passenger side and jewelry	(453)	outside mirror, antenna) Other exterior surface or tire
(009)	Add on equipment (e.g., tape		A (A1/A2)-pillar, B-pillar, or	(188)	Air bag compartment	(455)	
(,	deck, air conditioner)		roof side rail.	(100)	cover-passenger side and		(specify):
(010)	Left instrument panel and	(110)	Other right side object		object held	(454)	Unknown exterior objects
(,	below	(1.0)	(specify):	(189)	Air bag compartment	(404)	Chandwir exterior objects
(011)	Center instrument panel and		(openny).	(100)	cover-passenger side and	FXTE	RIOR OF OTHER MOTOR
(,	below	• • •			object in mouth	VEHIC	
(012)	Right instrument panel and	INTER	IOR	(190)	Other air bag (specify)		Front bumper
,	below		Seat, back support	(.50)	ag (apoony)	(502)	•
(013)	Glove compartment door	(152)	Belt restraint webbing/buckle	(195)	Other air bag compartment	(503)	~
(014)	Knee bolster	(153)	Belt restraint B-pillar or door	(.50)	cover (specify)	(550)	(specify):
(015)	Windshield including one or	(,	frame attachment point		()		(apoony).
,,	more of the following: front	(154)	Other restraint system			(504)	Hood
	header, A (A1/A2)-pillar,	(,	component (specify):	ROOF		(505)	
	instrument panel, mirror, or		соптренени (среспу),	(201)	Front header	(506)	
	steering assembly (driver side	(155)	Head restraint system	(202)	Rear header	(507)	Side surface
	only)	(160)	Other occupants (specify):	(203)	Roof left side rail	(508)	
(016)	Windshield including one or	(,	Cinci cocapanio (opocny).	(204)	Roof right side rail	(509)	Other side protrusions
(/	more of the following: front	(161)	Interior loose objects	(205)	Roof or convertible top	(303)	(specify):
	header, A (A1/A2)-pillar,	(162)	Child safety seat (specify):	(200)	Troot of conventible top		(specify).
	instrument panel, or mirror	(,	chine series, soci (epocity).	FLOO	R	(510)	Rear surface
	(passenger side only)	(163)	Other interior object (specify):		Floor (including toe pan)	(511)	
(017)	Windshield reinforced by	(100)	Cirie interior object (specify).	(252)	Floor or console mounted		•
(•,	exterior object (specify)			(232)		(512)	
	CALCITOT ODJOCK (Specify)	AIR BA	ie.		transmission lever, including	(513)	Other exterior of other moto
(019)	Other front object (specify):		Air bag-driver side	(253)	Console		vehicle (specify):
(010)	Cities work object (specify).	(171)	Air bag-driver side and	(254)	Parking brake handle	(E4.4)	11-1
		(171)	evewear	(234)	Foot controls including	(514)	
EFT S	SIDE	(172)	•		parking brake		motor vehicle
	Left side interior surface,	(172)	Air bag-driver side and jewelry	REAR		07115	TO VELLIOLE OD OD 1507 11.
001)	excluding hardware or	(1/3)	Air bag-driver side and object				R VEHICLE OR OBJECT IN
	armrests	(174)	held Air bag-driver side and object	, ,	Backlight (rear window)		ENVIRONMENT
052)		(17-7)		(302)			Ground
•	Left side hardware or armrest	(475)	in mouth	(202)	door, etc.	(598)	Other vehicle or object
053) 054)	Left A (A1/A2)-pillar	(1/5)	Air bag compartment	(303)	Other rear object (specify):		(specify):
	Left B-pillar Other left pillor (eposits):	/47e\	cover-driver side			(Paa-	
055)	Other left pillar (specify):	(1/6)	Air bag compartment	46	TR (# 400)0TR (# 550 F1)	(599)	Unknown vehicle or object
vee,	Log aido vaindos estados	/47-	cover-driver side and eyewear		TIVE (ASSISTIVE) DRIVING		
	Left side window glass	(177)	Air bag compartment		PMENT		CONTACT INJURY
-	Left side window frame	/4701	cover-driver side and jewelry	(401)	Hand controls for		Fire in vehicle
	Left side window sill	(178)	Air bag compartment		braking/acceleration	(602)	
	Left side window glass		cover-driver side and object	(402)	Steering control devices	(603)	• •
	including one or more of the		held		(attached to OEM steering		source
	following: frame, window sill,	(179)	Air bag compartment		wheel)		(specify):
	A (A1/A2)-pillar, B-pillar, or		cover-driver side and object in	(403)	Steering knob attached to	(604)	
	roof side rail.		mouth		steering wheel	(697)	Injured, unknown source
	Other left side object	(180)	Air bag-passenger side	(405)	Replacement steering wheel		
	(specify):	(181)	Air bag-passenger side and		(i.e., reduced diameter)		
			eyewear	(406)	Joy stick steering controls		
		(182)	Air bag-passenger side and	(407)	Wheelchair tie-downs		
RIGHT			jewelry	(408)	Modification to seat belts,		
	Right side interior surface,				(specify):		
	excluding hardware or			(409)	Additional or relocated		
	armrests				switches, (specify):		

OFFICIAL INJURY DATA — SOFT TISSUE INJURIES

Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)

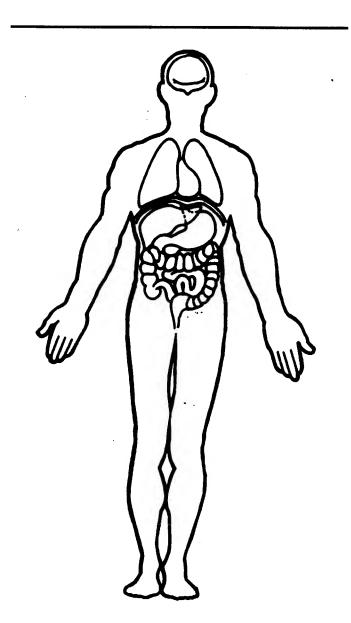


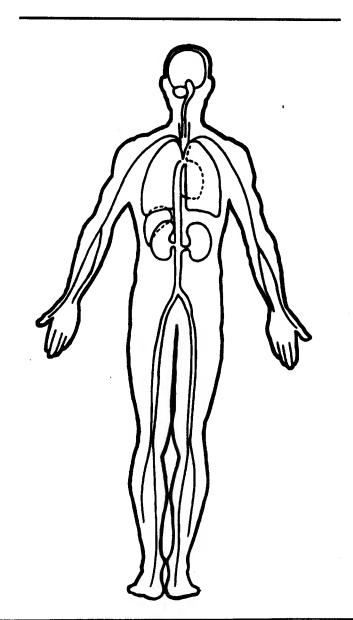


	OFFICIAL INJURY DATA — SKELETAL INJURIES
	ndicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and ource of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are navailable.)
Blood Alcohol Level (mg/dl) BAL = Glasgow Coma Scale Score	600
GCSS = Units of Blood Given Units =	151800.2,2 151800.2,2 151800.2,2 151800.2,2 151800.2,2 151800.2,2
Arterial Blood Gase pH = PO ₂ = PCO ₂ HCO ₃	
	851802.2,1 BRAKE

OFFICIAL INJURY DATA —INTERNAL INJURIES

Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)





National Accident Sampling System-Crashworthiness Data System: Occupant Injury Form

			OC	CUPANT				EMENT			
	Source of Injury Data	Body Region	Type of Anatomic Structure	A.I.S Specific Anatomic Structure	90 Level of Injury	A.I.S. Severity	Aspect	Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion Number
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Form Approved O.M.B. No. 2127-0021



National Highway Traffic Safety Administration	NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM
Primary Sampling Unit Number	OCCUPANT'S SEATING
2. Case Number - Stratum ABIT	10. Occupant's Seat Position
3. Vehicle Number	Front Seat (11) Left side
4. Occupant Number <u># 2</u>	(12) Middle (13) Right side
OCCUPANT'S CHARACTERISTICS	(14) Other (specify): (15) On or in the lap of another occupant
5. Occupant's Age Code actual age at time of accident. (00) Less than one year old (specify by month): (97) 97 years and older (99) Unknown	Second Seat (21) Left side (22) Middle (23) Right side (24) Other (specify): (25) On or in the lap of another occupant
6. Occupant's Sex	Third Seat (31) Left side
(1) Male (2) Female-not reported pregnant	(32) Middle
(3) Female-pregnant-1st trimester(1st-3rd month)	(33) Right side
(4) Female-pregnant-2nd trimester(4th-6th month)(5) Female-pregnant-3rd trimester(7th-9th month)(6) Female-pregnant-term unknown	(34) Other (specify): (35) On or in the lap of another occupant
(9) Unknown	Fourth Seat (41) Left side
	(42) Middle
1	(43) Right side
7. Occupant's Height Code actual height to the nearest centimeter.	(44) Other (specify):(45) On or in the lap of another occupant
(999) Unknown	(97) In or on unenclosed area
inches X 2.54 = centimeters	(98) Other seat (specify): (99) Unknown
8. Occupant's Weight	
Code actual weight to the nearest kilogram. (999) Unknown	11. Occupant's Posture (0) Normal posture
pounds X .4536 =kilograms	Abnormal posture (1) Kneeling or standing on seat
9. Occupant's Role 2	(2) Lying on or across seat (3) Kneeling, standing or sitting in front of seat (4) Sitting sideways or turned to talk with another
(2) Passenger (9) Unknown	occupant or to look out a rear window (5) Sitting on a console (6) Lying back in a reclined seat position (7) Bracing with feet or hands on a surface in front of
	seat (8) Other abnormal posture (specify):
	(9) Unknown

EJECTION/E	NTRAPMENT
12. Ejection (0) No ejection (1) Complete ejection (2) Partial ejection (3) Ejection, unknown degree (9) Unknown	15. Medium Status (Immediately Prior To Impact) (0) No ejection (1) Open (2) Closed (3) Integral structure (9) Unknown
13. Ejection Area (0) No ejection (1) Windshield (2) Left front (3) Right front (4) Left rear (5) Right rear (6) Rear (7) Roof (8) Other area (e.g., back of pickup, etc.) (specify): (9) Unknown	16. Entrapment (0) Not entrapped/exit not inhibited (1) Entrapped/pinned - mechanically restrained (2) Could not exit vehicle due to jammed doors, fire, etc. (specify): (9) Unknown 17. Occupant Mobility (0) Occupant fatal before removed from vehicle (1) Removed from vehicle while unconscious or
14. Ejection Medium (0) No ejection (1) Door/hatch/tailgate (2) Nonfixed roof structure (3) Fixed glazing (4) Nonfixed glazing (specify): (5) Integral structure (8) Other medium (specify): (9) Unknown	disoriented (2) Removed from vehicle due to injuries (3) Exited vehicle with some assistance (4) Exited vehicle under own power (5) Occupant fully ejected (9) Unknown

	BELT SYSTE	M FUNCTION
18.	Manual (Active) Belt System Availability (0) None available (1) Belt removed/destroyed (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt available—type unknown	22. Shoulder Belt Upper Anchorage Adjustment (0) No shoulder belt (1) No upper anchorage adjustment for shoulder belt Adjustable shoulder Belt Upper Anchorage (2) In full up position (3) In mid position
	Integral Belt Partially Destroyed (6) Shoulder belt (lap belt destroyed/removed) (7) Lap belt (shoulder belt destroyed/removed) (8) Other belt (specify):	(4) In full down position (5) Position unknown (9) Unknown if position has adjustable upper anchorage adjustment 23. Automatic (Passive) Belt System Availability/
19.	(9) Unknown Manual (Active) Belt System Use (00) None used, not available, or belt removed/destroyed (01) Inoperative (specify):	Function (0) Not equipped/not available (1) 2 point automatic belts (2) 3 point automatic belts (3) Automatic belts - type unknown
	(02) Shoulder belt (03) Lap belt (04) Lap and shoulder belt (05) Belt used—type unknown (08) Other belt used (specify):	Non-functional (4) Automatic belts destroyed or rendered inoperative (9) Unknown 24. Automatic (Passive) Belt System Use (0) Not equipped/not available/destroyed or rendered inoperative
	 (12) Shoulder belt used with child safety seat (13) Lap belt used with child safety seat (14) Lap and shoulder belt used with child safety seat (15) Belt used with child safety seat—type unknown (18) Other belt used with child safety seat 	(1) Automatic belt in use (2) Automatic belt not in use (manually disconnected, motorized track inoperative) (specify): (3) Automatic belt use unknown (9) Unknown
20.	(specify): (99) Unknown if belt used Proper Use of Manual (Active) Belts (0) None used or not available	25. Automatic (Passive) Belt System Type (0) Not equipped/not available (1) Non-motorized system (2) Motorized system (9) Unknown
	 (1) Belt used properly (2) Belt used properly with child safety seat Belt Used Improperly (3) Shoulder belt worn under arm (4) Shoulder belt worn behind back or seat (5) Belt worn around more than one person (6) Lap belt worn on abdomen 	26. Proper Use of Automatic (Passive) Belt System (0) Not equipped/not available/not used (1) Automatic belt used properly (2) Automatic belt used properly with child safety seat Automatic Belt Used Improperly
	Lap belt or lap and shoulder belt used improperly with child safety seat (specify): Other improper use of manual belt system (specify):	 (3) Automatic shoulder belt worn under arm (4) Automatic shoulder belt worn behind back (5) Automatic belt worn around more than one person (6) Lap portion of automatic belt worn on abdomen
	(9) Unknown	(7) Automatic lap and shoulder belt or automatic shoulder belt used improperly
;	Manual (Active) Belt Failure Modes During Accident (0) No manual belt used or not available (1) No manual belt failure(s) (2) Torn webbing (stretched webbing not included)	with child safety seat (specify): (8) Other improper use of automatic belt system (specify): (9) Unknown
!	 Broken buckle or latchplate Upper anchorage separated Other anchorage separated (specify): Broken retractor Combination of above (specify): 8) Other manual belt failure (specify):	27. Automatic (Passive) Belt Failure Modes During Accident (0) Not equipped/not available/not in use (1) No automatic belt failure(s) (2) Torn webbing (stretched webbing not included) (3) Broken buckle or latchplate (4) Upper anchorage separated (5) Other anchorage separated (specify):
	9) Unknown	 (6) Broken retractor (7) Combination of above (specify): (8) Other automatic belt failure (specify):
		(9) Unknown

POLICE REPORTED RESTRAINT USE	AIR BAG SYSTEM FUNCTION
28. Police Reported Belt Use (0) None used (1) Police did not indicate belt use (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt used, type not specified (6) Child safety seat (7) Automatic belt (8) Other type belt, (specify):	30. Frontal Air Bag System Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag Non-functional (2) Air bag disconnected (specify): (3) Air bag not reinstalled (9) Unknown
(9) Police indicated "unknown" 29. Police Reported Air Bag Availability/Function (0) No air bag available (1) Police did not indicate air bag availability/function (2) Deployed (3) Not deployed (4) Unknown if deployed (9) Police indicated "unknown"	31. Frontal Air Bag System Deployment (This Occupant Position) (0) Not equipped/not available (1) Deployed during accident (as a result of impact) (2) Deployed inadvertently just prior to accident (3) Deployed, details unknown (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (5) Unknown if deployed (7) Nondeployed (9) Unknown
Check the Primary Source Used In Determining Belt Use. [] Not equipped/not available/destroyed or rendered inoperative [] Vehicle inspection [] Official injury data + smrpacors [] Driver/occupant interview [] Other (specify):	32. Other Than First Seat Frontal Air Bag Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag Non-functional (2) Air bag disconnected (specify): (3) Air bag not reinstalled (9) Unknown Specify type of "other" air bag present:
	 33. Air Bag(s) Deployment, Other Than First Seat Frontal (This Occupant Position) (0) Not equipped with an "other" air bag (1) Deployed during accident (as a result of impact) (2) Deployed inadvertently just prior to accident (3) Deployed, details unknown (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (5) Unknown if deployed (7) Nondeployed (9) Unknown
	34. Are There Indications of Air Bag System Failure? (This Occupant Position) (0) Not equipped/not available (1) No (2) Yes (specify): (9) Unknown

FIRST SEAT FRONT	AL AIR BAG SYSTEM EVALUATION
 35. Had Vehicle Been in Previous Accident(s)? (0) Not equipped/not available (1) No previous accidents Yes (2) Previous accident(s) without deployment(s) (3) One previous accident with deployment (4) More than one previous accident with at leadeployment (8) Previous accidents, unknown deployments (9) Unknown 	(-996) Deployment, unknown longitudinal Delta V (-997) Not deployed (-998) Unknown if deployed (-999) Unknown
36. Type of Air Bag (0) Not equipped/not available (1) Original manufacturer installed system (2) Retrofitted air bag (3) Replacement air bag (8) Unknown type of air bag (9) Unknown	41. Did Air Bag Module Cover Flap(s) Open At Designated Tear Points? (0) Not equipped/not available (1) No (2) Yes (3) Deployed, unknown if flap(s) opened at designated tear points (7) Not deployed (8) Unknown if deployed (9) Unknown
 37. Had Any Prior Maintenance/Service Been Performed On This Air Bag System? (0) Not equipped/not available (1) No prior maintenance (2) Yes, prior maintenance (specify): (9) Unknown 	42. Were Air Bag Module Cover Flap(s) Damaged? 3 (0) Not equipped/not available (1) No (2) Yes (specify): (3) Deployed, unknown if air bag module cover flap(s) damaged (7) Not deployed (8) Unknown if deployed
38. Air Bag Deployment Accident Event Sequence Number (00) Not equipped/not available Code the accident event sequence r that initiated the air bag deploym (96) Deployed, unknown event (97) Not deployed (98) Unknown if deployed (99) Unknown	(9) Unknown 43. Was There Damage To The Air Bag?
 39. CDC For Air Bag Deployment Impact (0) Not equipped/not available (1) Highest delta V (2) Second highest delta V (3) Other non-coded delta V (specify): (6) Deployed, unknown event (7) Not deployed (8) Unknown if deployed (9) Unknown 	(05) Holed (06) Burned (07) Abraded (88) Other damage (specify): (95) Damaged, details unknown (96) Deployed, unknown if damaged (97) Not deployed (98) Unknown if deployed (99) Unknown

	FIRST SEAT FRONTAL AIR BAG SYSTEM EVALUATION continued	HEAD RESTRAINT AND SEAT EVALUATION
44.	Source of Air Bag Damage (00) Not equipped/not available (01) Not damaged (02) Object worn by occupant, (specify): (03) Object carried by occupant, (specify): (04) Adaptive/assistive controls, (specify): (05) Fire in vehicle (06) Thermal burns (07) Rescue or emergency efforts (08) Other damage source (specify): (95) Damaged, unknown source (96) Deployed, unknown if damaged (97) Not deployed (98) Unknown	49. Head Restraint Type/Damage by Occupant at This Occupant Position (0) No head restraints (1) Integral—no damage (2) Integral—damaged during accident (3) Adjustable—no damage (4) Adjustable—damaged during accident (5) Add-on—no damage (6) Add-on—damaged during accident (8) Other (specify): (9) Unknown 50. Seat Type (this Occupant Position) (00) Occupant not seated or no seat (01) Bucket (02) Bucket with folding back (03) Bench (04) Bench with separate back cushions (05) Bench with folding back(s)
46.	Was The Air Bag Tethered? (0) Not equipped/not available (1) No (2) Yes (specify number of tether straps): (3) Deployed, unknown if tethered (7) Not deployed (8) Unknown if deployed (9) Unknown Did The Air Bag Have Vent Ports? (0) Not equipped/not available (1) No	(06) Split bench with separate back cushions (07) Split bench with folding back(s) (08) Pedestal (i.e., column supported) (09) Box mounted seat (i.e., van type) (10) Other seat type (specify): (99) Unknown 51. Seat Orientation (this Occupant Position) (0) Occupant not seated or no seat (1) Forward facing seat (2) Rear facing seat (3) Side facing seat (inward) (4) Side facing seat (outward)
47.	(2) Yes (specify number of vent ports): (3) Deployed, unknown if vent ports present (7) Not deployed (8) Unknown if deployed (9) Unknown Was the Air Bag in this Occupant's Position Contacted by Another Occupant? (0) Not equipped/not available (1) No (2) Yes (specify): (3) Deployed, unknown if other occupant contact to air bag (7) Not deployed (8) Unknown if deployed (9) Unknown	(8) Other (specify): (9) Unknown 52. Seat Track Adjusted Position Prior To Impact (0) Occupant not seated or no seat (1) Non-adjustable seat track Adjustable Seat Track (2) Seat at forward most track position (3) Seat between forward most and middle track positions (4) Seat at middle track position (5) Seat between middle and rear most track positions (6) Seat at rear most track position (9) Unknown
	Was This Occupant Wearing Eye-wear? 1) No 2) Eyeglasses/sunglasses 3) Contact lenses 4) Deployed, unknown if eyewear worn 7) Not deployed 8) Unknown if deployed 9) Unknown	

HEAD RESTRAINT AND SEAT EVALUATION continued

9

- 53. Seat Back Incline Prior and Post Impact
 - (00) Occupant not seated or no seat
 - (01) Not adjustable

Upright prior to impact

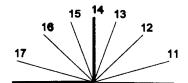
- (11) Moved to completely rearward position
- (12) Moved to rearward midrange position
- (13) Moved to slightly rearward position
- (14) Retained pre-impact position
- (15) Moved to slightly forward position
- (16) Moved to forward midrange position
- (17) Moved to completely forward position

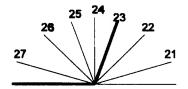
Slightly reclined prior to impact

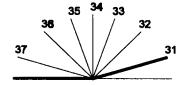
- (21) Moved to completely rearward position
- (22) Moved to rearward midrange position
- (23) Retained pre-impact position
- (24) Moved to upright position
- (25) Moved to slightly forward position
- (26) Moved to forward midrange position
- (27) Moved to completely forward position

Completely reclined prior to impact

- (31) Retained pre-impact position
- (32) Moved to rearward midrange position
- (33) Moved to slightly rearward position
- (34) Moved to upright position
- (35) Moved to slightly forward position
- (36) Moved to forward midrange position
- (37) Moved to completely forward position
- (99) Unknown
- 54. Seat Performance (this Occupant Position)
 - (0) Occupant not seated or no seat
 - (1) No seat performance failure(s)
 - (2) Seat adjusters failed
 - (3) Seat back folding locks or "seat back" failed (specify):
 - (4) Seat track/anchors failed
 - (5) Deformed by impact of occupant
 - (6) Deformed by passenger compartment intrusion, (specify):
 - (7) Combination of above (specify):
 - (8) Other (specify):
 - (9) Unknown







		CHIL	D SAF	AFETY SEAT
55.	Child Safety Seat Make/Model	4 4	9	58. Child Safety Seat Harness Usage 9 9
	Applicable codes are found in your NAS Data Collection, Coding and Editing (950) Built-in child safety seat	S CDS		59. Child Safety Seat Shield Usage
	(997) Other make/model (specify):			60. Child Safety Seat Tether Usage
	(998) Unknown make/model (999) Unknown if child safety seat used	1		Note: Options below applicable to
56.	Type of Child Safety Seat (0) No child safety seat		<u>\$</u>	Variables OA58-OA60. (00) No child safety seat
	(1) Infant seat(2) Toddler seat(3) Convertible seat			Not Designed With Harness/Shield/Tether (01) After market harness/shield/tether added, not used
	 (4) Booster seat - with shield (5) Booster seat - without shield (7) Other type child safety seat (specify) :		(02) After market harness/shield/tether used (03) Child safety seat used, but no after market harness/shield/tether added
	(8) Unknown child safety seat type (9) Unknown if child safety seat used	<u> </u>		(09) Unknown if harness/shield/tether added or used
57	Child Safety Seat Orientation	d	4	Designed With Harness/Shield/Tether (11) Harness/shield/tether not used (12) Harness/shield/tether used
•••	(00) No child safety seat		. 	(19) Unknown if harness/shield/tether used
	Designed for Rear Facing for This AgeA (01) Rear facing	Weight		Unknown If Designed With Harness/Shield/Tether (21) Harness/shield/tether not used
	(02) Forward facing(08) Other orientation (specify):			(22) Harness/shield/tether used (29) Unknown if harness/shield/tether used
	(09) Unknown orientation			(99) Unknown if child safety seat used
	Designed For Forward Facing for This A (11) Rear facing (12) Forward facing	<i>∖ge/Weig</i>	ıht	
	(12) Forward facing(18) Other orientation (specify):			
	(19) Unknown orientation			
	Unknown Design or Orientation For This Age/Weight, or Unknown Age/Weight (21) Rear facing	S		
	(22) Forward facing			
	(28) Other orientation (specify):			
	(29) Unknown orientation			
	(99) Unknown if child safety seat used			

The commentation of the comment of t	-3-
INJURY CONSEQUENCES	
61. Injury Severity (Police Rating) (0) O - No injury (1) C - Possible injury (2) B - Nonincapacitating injury (3) A - Incapacitating injury (4) K - Killed (5) U - Injury, severity unknown (6) Died prior to accident (9) Unknown 62. Treatment - Mortality (0) No treatment (1) Fatal (2) Fatal - ruled disease (specify): Nonfatal (3) Hospitalization (4) Transported and released (5) Treatment at scene - nontransported (6) Treatment later (7) Treatment - other (specify): (8) Transported to a medical facility-unknown if treated (9) Unknown	63. Type Of Medical Facility (for Initial Treatment) (0) Not treated at a medical facility (1) Trauma center (2) Hospital (3) Medical clinic (4) Physician's office (5) Treatment later at medical facility (8) Other (specify): (9) Unknown 64. Hospital Stay (00) Not Hospitalized — Code the number of days (up through 60) that the occupant stayed in hospital. (61) 61 days or more (99) Unknown 65. Working Days Lost — Code the number of days (up through 60) that the occupant lost from work due to the accident (00) No working days lost (61) 61 days or more (62) Fatally injured (97) Not working prior to accident (99) Unknown
STOP WO	RK HERE

VARIABLES 66-74

INJURY CONSEQUENCES	TRAUMA DATA
66. Time to Death Code number of hours from time of accident to time of death up through 24 hours. If time of death is greater than 24 hours, code number of days. (Note: 1 day = 31, 2 days = 32, n days = 30 + n up through 30 days = 60) (00) Not fatal (96) Fatal - ruled disease (99) Unknown	71. Glasgow Coma Scale (GCS) Score (at Medical Facility) (00) Not injured (01) Injured - not treated at medical facility (02) No GCS Score at medical facility (03-15) Code the actual value of the initial GCS Score recorded at medical facility. (97) Injured, details unknown (99) Unknown if injured
67. 1st Medically Reported Cause of Death <u>Φ 5</u>	72. Was the Occupant Given Blood? (1) No - blood not given (2) Yes - blood given
68. 2nd Medically Reported Cause of Death 69. 3rd Medically Reported Cause of Death 69. 3rd Medically Reported Cause of Death	(specify units):(9) Unknown if blood given
Code the Occupant Injury from line number(s) for the medically reported injury(s) which reportedly contributed to this occupant's death (00) Not fatal or no additional causes (96) Mode of death given but specific injuries are not linked to cause of death. (specify): (97) Other result (includes fatal ruled	73. Arterial Blood Gases (ABG) – HCO ₃ (00) Not injured (01) Injured, ABGs not measured or reported (02-50) Code the actual value of the HCO ₃ (96) ABGs reported, HCO ₃ unknown (97) Injured, details unknown (99) Unknown if injured
disease) (specify):	BELT USE DETERMINATION
70. Number of Recorded Injuries for This Occupant Code the actual number of injuries recorded for this occupant. (00) No recorded injuries (97) Injured, details unknown (99) Unknown if injured	74. Primary Source of Belt Use Determination (0) Not equipped/not available/destroyed or rendered inoperative (1) Vehicle inspection (2) Official injury data (3) Driver/occupant interview (8) Other (specify): (9) Unknown if belt used

Form Approved O.M.B. No. 2127-0021

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

National Highway Traffic Safety Administration

2. Case Number - Stratum

OCCUPANT INJURY FORM

Injury

BEST AVAILABLE

1. Primary Sampling Unit Number

AB

A.I.S. - 90

3. Vehicle Number 4. Occupant Number

\$ 2

Occupant

INJURY DATA

Record below the actual injuries sustained by this occupant that were identified from the official and unofficial data sources. Remember not to double count an injury just because it was identified from two different sources. If greater than ten injuries have been documented, encode the balance on the Occupant Injury Supplement.

000000000000000000000000000000000000000	Source of Injury Data	Body Region	Type of Anatomic Structure	Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect	Injury Source	Source Confidence Level	Direct/ Indirect Injury	Area Intrusion Number
1st	5. <u> </u>	6. <u>/</u>	7. <u>4</u> 8	L <u>04</u>	9. <u>54</u>	10	11. 6 12.	180	132	41	5. <u>\$</u> \$
2nd	16. <u>/</u>	17.6	18 <u> </u> 5	. 02	20. <u>& y</u>	21	<u> 26</u> 21.	150	24. <u>-</u> 2 :	95. <u>Z</u> 2	15. <u>Ø Ø</u>
3rd	27 <u> </u>	28. <u>/</u>	29. <u>4</u> 36	<u> 4</u>	31. <u>Ø 2</u>	32 <u>3</u>	33 <u>. G</u> 34.	180	35. <u>Z</u> :	16. <u>/</u> 3	7. <u>ØØ</u>
4th	38. <u>/</u>	39, /_	40. <u>4</u> 41	<u> </u>	42 66	43.3	44. 6 45.	<u> 18 </u>	46	17. <u>/</u> 4	18. <u>Ф Ф</u>
5th	49	50. <u>/</u>	51. <u> </u>	<u> </u>	53. <u>Ø.Ø</u>	54. <u>-3</u>	55. <u>2</u> 58.	180	57. <u>Z</u> (58. <u>/</u> 5	5 <u>0</u> , <u>44</u>
6th	60. <u>/</u>	61. <u>7</u>	62 <u>-</u> 63	28	64. <u>ϕ 2</u>	65. <u>2</u>	66 67.	<u> </u>	68. <u> 2</u> (i9. <u>/</u> 7	10. <u>Ø /</u>
7th	71. <u>/</u>	72. <u>Z</u>	73. <u>9</u> 74	.22	75. <u>Ø 2</u>	76. <u>/</u>	77 78.	180	79	10. <u>/</u> 8	n. <u> </u>
8th	82. <u>/</u>	83. <u>Z</u>	84. <u>9</u> 85	<u> </u>	86. <u>Ø 2</u>	87. <u>/</u>	88. / 89.	697	90. <u>9</u> 1	n <u>. 7</u> e	n2. <u>4 4</u>
9th	93. <u>1</u>	94. 2	95. <u>9</u> 96	72	97. <u>Ø Z</u>	96	99. / 100.	<u>180</u>	101 10)2. <u>/</u> 10	ο3. <u>Φ</u> Φ
10th	104. <u>/</u> 1	105. <u>Z</u> 1	06. <u>9</u> 107	<u>d4</u> .	108, <u>Ø Z-</u>	109/	110. <u>/</u> 111.	697	112. <u>9</u> 1	137 11	4. <u>Ø &</u>

	10000		7.	occ	UPANT	INJURY	DATA				
	Source of Injury Data	Body Region	Type of Anatomic Structure	A.I.S 90 Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect	Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion Number
11th	<u></u>	2	<u>9</u>	<u> </u>	<u> </u>	<u>'</u>	<u></u>	180			<u>ø4</u>
12th	<u> </u>	3	9	<u> </u>	<u>4 2</u>		<u>/</u>	<u> 152</u>	<u>^</u>		<u> </u>
13th	<u>1</u>	7	9	<u> 4 </u>	<u>4.2</u>		<u>/</u>	4/2_	<u>2</u>		<u> </u>
14th	1	7	9	<u>φ</u> 2	<u> </u>	1	<u>/</u>	184	<u>2</u>		<u> </u>
15th	<u></u>	8	<u>9</u>	<u>04</u>	<u> </u>		<u>/</u>	697	<u>9</u>	<u>7</u>	<u> </u>
16th		8	9	<u> 42</u>	92			697	<u>9</u>	2	φφ_
17ih		<u>8</u>	9_	<u> </u>	42	<u>/</u>		4/2	2	<u>.</u>	<u>ø/</u>
18th	<u> 1</u>	8	9	42	<u> 42</u>	<u>!</u>	<u>_2</u>	9/2	2	<u>′</u>	9/
19ih	1	8	9_	<u>04</u>	<u> 42</u>	<u> </u>	<u> 2</u>	412	<u>.2</u>	<u> </u>	9/
20th	<u></u>	8	9_	<u> 42</u>	<u>92</u>		2	9/2	<u>-2</u> -	<u>′</u>	<u>4'_</u>
21si	<u>. L</u>	<u>_5</u>	9	<u> 42</u>	<u> 42</u>	<u>/</u>		153	· <u>2</u>		44
22nd	<u></u>	_5	9	<u> </u>	42		<u></u>	152	2	<u>/</u>	<u> </u>
23rd	1	<u>5</u>	<u>9</u>	<u> </u>	92			18 0	<u>.3</u>		99
24th	_1	5	<u>9</u>	42	4>		_	180	<u>3</u>	<u>/</u>	øø_
25th	<u></u>	<u>.5</u>	2	<u> 44</u>	<u> 42</u>			697	<u>9</u>	7	<u>Ø</u> Ø

National Accident Sampling System-Crashworthiness Data System: Occupant Injury Form

			OC	CUPANT	INJURY	DATA	SUPPL	ant Injury Fo EMENT	1111		
	Source of Injury Data	Body Region	Type of Anatomic Structure	A.I.S Specific Anatomic Structure	90 Level of Injury	A.I.S. Severity	Aspect	Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion Number
<u>z</u>	/	2	9	φ2 -	<u>#2</u>		8	180			UP
<u>21</u>		2	9	42	42	<u>′</u>	<u>2</u>	184		_/	<u>*</u> @
28		2	9	42	42	<u>/</u>	<u>4</u>	180			<u> </u>
29	1	2	9	<u>\$ 4</u>	42		<u>2</u>	180	3	<u>/</u>	20
<u>w</u> _		<u>2</u>	9	<u> </u>	42		7	184	2		<u> </u>
31		_Z	9	42	42		7	18 9			<u> </u>
32	1	5	9	44	42	<u>/</u>	8	<u>151</u>	<u>3</u>	_′	<u> </u>
33	<u>_/</u>	8	9	02	<u> </u>		2	151	<u>3</u>		<u> </u>
34		8	9	42	42			151	<u>3</u>	_/	<u> </u>
<u>35</u>	<u> </u>	7	9	44	42		2	4/2	_2	_/	4/
	_		-				_				
	_				**************************************				_		
 .	. *					_	_ ·				
			_				_				
			No.						_		

OCCUPANT INJURY CLASSIFICATION

Body Region Specific Anatomic Level of Injury Aspect Structure Head Specific injuries are Right (2) (3) (4) (5) (6) (7) (8) Face assigned consecutive (2) (3) Left Neck Vessels, Nerves, Organs. two-digit numbers beginning Bilateral Thorax Bones, Joints are assigned with 02. Central Abdomen (5) consecutive two digit Anterior Spine numbers beginning with 02. To the extent possible, within (6)Posterior Upper Extremity the organizational (7)Superior Lower Extremity The exceptions to this rule framework of the AIS, 00 is (8)Inferior (9) Unspecified apply to: assigned to an injury NFS as (9)Unknown to severity or where only one ĺΟί Whole region Whole Area injury is given in the (02) Skin - Abrasion Type of Anatomic dictionary for that anatomic Structure (04)Skin - Contusion structure. 99 is assigned to (06) Skin - Laceration any injury NFS as to lesion Whole Area Skin - Avulsion (08) or severity. (2) (3) (4) (10) Vessels **Amputation** (20) **Nerves** Burn **Abbreviated Injury Scale** Organs (includes (30)Crush Muscles/ligaments) (40)Degloving Minor Injury (2) (3) (5) Skeletal (includes **(50)** Injury - NFS Moderate Injury Trauma, other than ioints) (90) Serious Injury (4) (5) (6) Head - LOC mechanical Severe Injury (9) Skin Critical Injury Head - LOC Maximum (02) Length of LOC (untreatable) (7)Injured, unknown (04) Level severity (06)of (08) Consciousness (10) Concussion Spine Cervical (02)Thoracic (04)(06) Lumbar

SOURCE OF INJURY DATA

INJURY SOURCE CONFIDENCE LEVEL

DIRECT/INDIRECT INJURY

OFFICIAL RECORDS

- (1) Autopsy records with or without hospital/medical records
- (2) Hospital/medical records other than emergency room (e.g., discharge summary)
- (3) Emergency room records only (including associated X-rays or other lab reports)
- (4) Private physician, walk-in or emergency clinic

UNOFFICIAL RECORDS

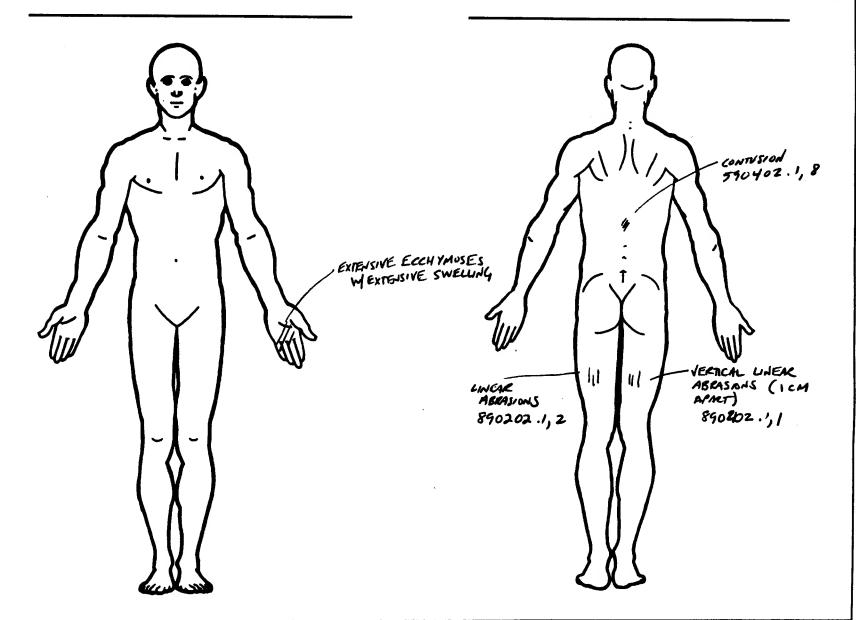
- (5) Lay coroner report
- (6) E.M.S. personnel
- (7) Interviewee
- (8) Other source (specify):
- (9) Police

- (1) Certain
- (2) Probable
- (3) Possible
- (9) Unknown

- (1) Direct contact injury
- (2) Indirect contact injury
- Noncontact injury
- Injured, unknown source

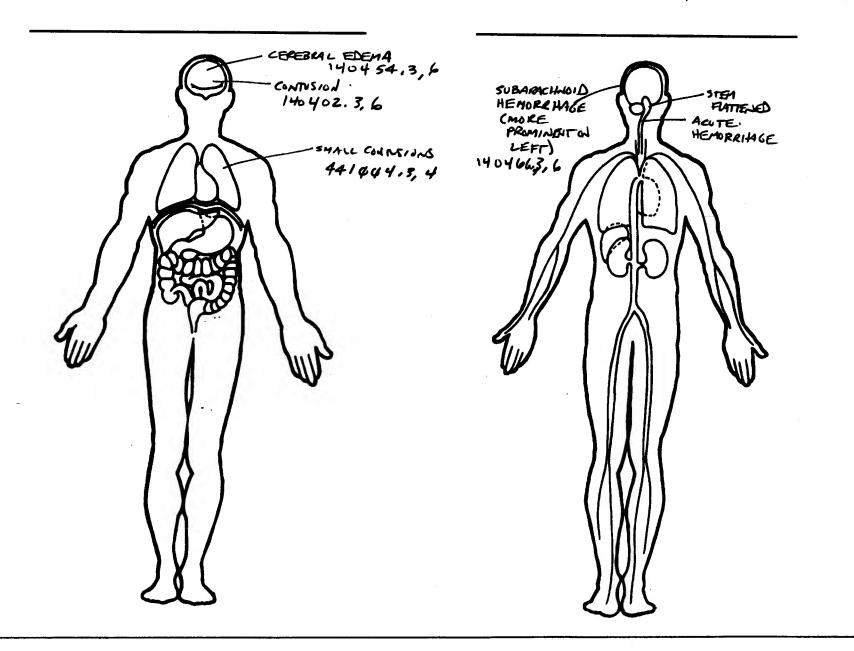
INJURY SOURCES FRONT Right side hardware or (183) Air bag-passenger side and (102)(411) Wall mounted head rest (used (001) Windshield object held behind wheel chair) (002) Mirror (103)Right A (A1/A2)-pillar Air bag-passenger side and Other adaptive device (412)(003) Sunvisor (104)Right B-pillar object in mouth (specify): (004)Steering wheel rim Other right pillar (specify): (105)(185)Air bag compartment (005)Steering wheel hub/spoke cover-passenger side (006) Steering wheel (combination Right side window glass (186) Air bag compartment EXTERIOR of OCCUPANT'S of codes 004 and 005) (107)Right side window frame cover-passenger side and VEHICLE (007)Steering column, transmission (108) Right side window sill eyewear (451) Hood selector lever, other Right side window glass (187) Air bag compartment (452) Outside hardware (e.g., attachment including one or more of the cover-passenger side and outside mirror, antenna) (008) Cellular telephone or CB radio following: frame, window sill, iewelry Other exterior surface or tires (009) Add on equipment (e.g., tape A (A1/A2)-pillar, B-pillar, or (188) Air bag compartment (specify): deck, air conditioner) roof side rail. cover-passenger side and (010) Left instrument panel and (110) Other right side object object held (454) Unknown exterior objects below (specify): (189) Air bag compartment (011) Center instrument panel and cover-passenger side and EXTERIOR OF OTHER MOTOR below object in mouth **VEHICLE** (012)Right instrument panel and INTERIOR (190) Other air bag (specify) (501) Front bumper below (151) Seat, back support (502) Hood edge (013) Glove compartment door (152) Belt restraint webbing/buckle (195) Other air bag compartment (503) Other front of vehicle (014) Knee bolster (153) Belt restraint B-pillar or door cover (specify) (specify): (015) Windshield including one or frame attachment point more of the following: front (154) Other restraint system (504) Hood header, A (A1/A2)-pillar, component (specify): ROOF (505)Hood ornament instrument panel, mirror, or (201) Front header (506)Windshield, roof rail, A-pillar steering assembly (driver side (155)Head restraint system (202) Rear header (507) Side surface only) (160) Other occupants (specify): (203) Roof left side rail (508)Side mirrors (016) Windshield including one or (204)Roof right side rail (509)Other side protrusions Interior loose objects more of the following: front (161)(205)Roof or convertible top (specify): header, A (A1/A2)-pillar, Child safety seat (specify): instrument panel, or mirror **FLOOR** (510) Rear surface (passenger side only) (163) Other interior object (specify): (251) Floor (including toe pan) Undercarriage (017) Windshield reinforced by (252) Floor or console mounted (512)Tires and wheels exterior object (specify) transmission lever, including (513) Other exterior of other motor AIR BAG console vehicle (specify): _ (019) Other front object (specify): (170) Air bag-driver side (253) Parking brake handle (171) Air bag-driver side and (254) Foot controls including (514) Unknown exterior of other eyewear parking brake motor vehicle LEFT SIDE (172) Air bag-driver side and jewelry (051) Left side interior surface, (173)Air bag-driver side and object REAR OTHER VEHICLE OR OBJECT IN excluding hardware or (301) Backlight (rear window) THE ENVIRONMENT armrests (174) Air bag-driver side and object (302)Backlight storage rack, (551) Ground (052) Left side hardware or armrest in mouth door, etc. (598)Other vehicle or object (053)Left A (A1/A2)-pillar (175) Air bag compartment (303)Other rear object (specify): (specify): (054) Left B-pillar cover-driver side (055)Other left pillar (specify): (176) Air bag compartment (599) Unknown vehicle or object cover-driver side and eyewear ADAPTIVE (ASSISTIVE) DRIVING (056)Left side window glass Air bag compartment EQUIPMENT NONCONTACT INJURY (057)Left side window frame cover-driver side and jewelry (401) Hand controls for (601) Fire in vehicle (058)Left side window sill (178) Air bag compartment braking/acceleration (602) Flying glass (059)Left side window glass cover-driver side and object (402) Steering control devices (603) Other noncontact injury including one or more of the held (attached to OEM steering source following: frame, window sill, (179) Air bag compartment wheel) (specify): A (A1/A2)-pillar, B-pillar, or (403) Steering knob attached to cover-driver side and object in (604) Air bag exhaust gases roof side rail. steering wheel (697) Injured, unknown source (060) Other left side object Air bag-passenger side (405) Replacement steering wheel (181) Air bag-passenger side and (specify): (i.e., reduced diameter) Joy stick steering controls evewear (406)(182) Air bag-passenger side and (407) Wheelchair tie-downs RIGHT SIDE jewelry (408)Modification to seat belts, (101) Right side interior surface, (specify): excluding hardware or (409)Additional or relocated armrests switches, (specify): (410) Raised roof

Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



	OFFICIAL INJURY DATA — SKELETAL INJURIES
Restrained?	
No!	ndicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and
	ource of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are navailable.)
Blood Alcohol Leve (mg/dl) BAL = Glasgow Coma Scale Score	
GCSS =	
Units = Arterial Blood Gase pH = PO ₂ = PCO ₂	152802.2, Z
HCO,	

Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)



petechiae /pētē'kēē/sing. petechia /-ə/ tiny purple or red spots that appear on the skin because of small spots of bleeding under the skin. Petechiae range from pinpoint to pinhead size and are even with the skin surface. Compare ecchymosis.-petechial, adj.

diastasis /dī-as'təsis/ the separation of two body parts that normally are joined together, as the separation of parts of a bone.

atlantooccipital joint /-oksip'itəl/ one of a pair of joints formed where the atlas of the vertebral column meets the occipital bone of the skull.

U.S. Department of Transportation OCCUPANT ASSESSMENT FORM

Form Approved O.M.B. No. 2127-0021



National Highway Traffic Safety Administration	NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM
Primary Sampling Unit Number	OCCUPANT'S SEATING
2. Case Number - Stratum AB 17	10. Occupant's Seat Position 2 /
3. Vehicle Number	Front Seat (11) Left side
4. Occupant Number <u>4</u> 3	(12) Middle (13) Right side
OCCUPANT'S CHARACTERISTICS	(14) Other (specify):
5. Occupant's Age	(14) Other (specify):
8. Occupant's Weight Code actual weight to the nearest kilogram. (999) Unknown pounds X .4536 =kilograms 9. Occupant's Role (1) Driver (2) Passenger (9) Unknown	11. Occupant's Posture (0) Normal posture Abnormal posture (1) Kneeling or standing on seat (2) Lying on or across seat (3) Kneeling, standing or sitting in front of seat (4) Sitting sideways or turned to talk with another occupant or to look out a rear window (5) Sitting on a console (6) Lying back in a reclined seat position (7) Bracing with feet or hands on a surface in front of seat (8) Other abnormal posture (specify): (9) Unknown

EJECTION/ENTRAPMENT			
() () ()	jection) No ejection) Complete ejection) Partial ejection) Ejection, unknown degree) Unknown	<u></u> \$	15. Medium Status (Immediately Prior To Impact) φ (0) No ejection (1) Open (2) Closed (3) Integral structure (9) Unknown
(1) (2) (3) (4) (5) (6) (6)	jection Area i) No ejection i) Windshield i) Left front i) Left rear i) Right rear i) Right rear i) Roof i) Other area (e.g., back of pickup, etc.) (specify): i) Unknown	4	16. Entrapment (0) Not entrapped/exit not inhibited (1) Entrapped/pinned - mechanically restrained (2) Could not exit vehicle due to jammed doors, fire, etc. (specify): (9) Unknown 17. Occupant Mobility (0) Occupant fatal before removed from vehicle (1) Removed from vehicle while unconscious or disoriented (2) Removed from vehicle due to injuries
(1 (2 (3 (4 (5	(0) No ejection (1) Door/hatch/tailgate (2) Nonfixed roof structure (3) Fixed glazing (4) Nonfixed glazing (specify): (5) Integral structure (8) Other medium (specify): (9) Unknown	(3) Exited vehicle with some assistance (4) Exited vehicle under own power (5) Occupant fully ejected (9) Unknown	

	BELT SYSTE	M FUNCTION
18.	Manual (Active) Belt System Availability (0) None available (1) Belt removed/destroyed (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt available—type unknown	22. Shoulder Belt Upper Anchorage Adjustment (0) No shoulder belt (1) No upper anchorage adjustment for shoulder belt Adjustable shoulder Belt Upper Anchorage (2) In full up position (3) In mid position (4) In full down position
19.	Integral Belt Partially Destroyed (6) Shoulder belt (lap belt destroyed/removed) (7) Lap belt (shoulder belt destroyed/removed) (8) Other belt (specify): (9) Unknown Manual (Active) Belt System Use (00) None used, not available, or belt removed/destroyed (01) Inoperative (specify):	(5) Position unknown (9) Unknown if position has adjustable upper anchorage adjustment 23. Automatic (Passive) Belt System Availability/ Function (0) Not equipped/not available (1) 2 point automatic belts (2) 3 point automatic belts (3) Automatic belts - type unknown
	(02) Shoulder belt (03) Lap belt (04) Lap and shoulder belt (05) Belt used—type unknown (08) Other belt used (specify): (12) Shoulder belt used with child safety seat	Non-functional (4) Automatic belts destroyed or rendered inoperative (9) Unknown 24. Automatic (Passive) Belt System Use (0) Not equipped/not available/destroyed or rendered inoperative (1) Automatic belt in use (2) Automatic belt not in use (manually
20.	 (13) Lap belt used with child safety seat (14) Lap and shoulder belt used with child safety seat (15) Belt used with child safety seat—type unknown (18) Other belt used with child safety seat (specify): (99) Unknown if belt used Proper Use of Manual (Active) Belts 	disconnected, motorized track inoperative) (specify): (3) Automatic belt use unknown (9) Unknown 25. Automatic (Passive) Belt System Type (0) Not equipped/not available (1) Non-motorized system
20.	 (0) None used or not available (1) Belt used properly (2) Belt used properly with child safety seat Belt Used Improperly (3) Shoulder belt worn under arm (4) Shoulder belt worn behind back or seat (5) Belt worn around more than one person (6) Lap belt worn on abdomen (7) Lap belt or lap and shoulder belt used improperly with child safety seat (specify): 	(9) Unknown 26. Proper Use of Automatic (Passive) Belt System (0) Not equipped/not available/not used (1) Automatic belt used properly (2) Automatic belt used properly with child safety seat Automatic Belt Used Improperly (3) Automatic shoulder belt worn under arm (4) Automatic shoulder belt worn behind back (5) Automatic belt worn around more than
24	(8) Other improper use of manual belt system (specify): (9) Unknown Manual (Active) Belt Failure Modes	one person (6) Lap portion of automatic belt worn on abdomen (7) Automatic lap and shoulder belt or automatic shoulder belt used improperly
۷1.	During Accident (0) No manual belt used or not available (1) No manual belt failure(s) (2) Torn webbing (stretched webbing not included) (3) Broken buckle or latchplate (4) Upper anchorage separated (5) Other anchorage separated (specify): (6) Broken retractor (7) Combination of above (specify): (8) Other manual belt failure (specify):	with child safety seat (specify): (8) Other improper use of automatic belt system (specify): (9) Unknown 27. Automatic (Passive) Belt Failure Modes During Accident (0) Not equipped/not available/not in use (1) No automatic belt failure(s) (2) Torn webbing (stretched webbing not included) (3) Broken buckle or latchplate (4) Upper anchorage separated (5) Other anchorage separated (specify):
	(9) Unknown	 (6) Broken retractor (7) Combination of above (specify): (8) Other automatic belt failure (specify): (9) Unknown

POLICE REPORTED RESTRAINT USE	AIR BAG SYSTEM FUNCTION
28. Police Reported Belt Use (0) None used (1) Police did not indicate belt use (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt used, type not specified (6) Child safety seat (7) Automatic belt (8) Other type belt, (specify):	30. Frontal Air Bag System Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag Non-functional (2) Air bag disconnected (specify): (3) Air bag not reinstalled (9) Unknown
(9) Police indicated "unknown" 29. Police Reported Air Bag Availability/Function (0) No air bag available (1) Police did not indicate air bag availability/function (2) Deployed (3) Not deployed (4) Unknown if deployed (9) Police indicated "unknown"	31. Frontal Air Bag System Deployment (This Occupant Position) (0) Not equipped/not available (1) Deployed during accident (as a result of impact) (2) Deployed inadvertently just prior to accident (3) Deployed, details unknown (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (5) Unknown if deployed (7) Nondeployed (9) Unknown
Check the Primary Source Used In Determining Belt Use. [] Not equipped/not available/destroyed or rendered inoperative [] Vehicle inspection [] Official injury data [] Driver/occupant interview [] Other (specify):	32. Other Than First Seat Frontal Air Bag Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag Non-functional (2) Air bag disconnected (specify): (3) Air bag not reinstalled (9) Unknown Specify type of "other" air bag present:
	 33. Air Bag(s) Deployment, Other Than First
	34. Are There Indications of Air Bag System Failure? (This Occupant Position) (0) Not equipped/not available (1) No (2) Yes (specify):

FIRST SEAT FRONTAL AIR	BAG SYSTEM EVALUATION
 35. Had Vehicle Been in Previous Accident(s)? (0) Not equipped/not available (1) No previous accidents Yes (2) Previous accident(s) without deployment(s) (3) One previous accident with deployment (4) More than one previous accident with at least one deployment (8) Previous accidents, unknown deployment status (9) Unknown 	40. Longitudinal Component of Delta V For Air Bag Deployment Impact (-000) Not equipped/not available Code the value of the delta V for the impact that initiated the air bag deployment (-996) Deployment, unknown longitudinal Delta V (-997) Not deployed (-998) Unknown if deployed (-999) Unknown
36. Type of Air Bag (0) Not equipped/not available (1) Original manufacturer installed system (2) Retrofitted air bag (3) Replacement air bag (8) Unknown type of air bag (9) Unknown	41. Did Air Bag Module Cover Flap(s) Open At Designated Tear Points? (0) Not equipped/not available (1) No (2) Yes (3) Deployed, unknown if flap(s) opened at designated tear points (7) Not deployed (8) Unknown if deployed (9) Unknown
37. Had Any Prior Maintenance/Service Been Performed On This Air Bag System? (0) Not equipped/not available (1) No prior maintenance (2) Yes, prior maintenance (specify): (9) Unknown	42. Were Air Bag Module Cover Flap(s) Damaged? (0) Not equipped/not available (1) No (2) Yes (specify): (3) Deployed, unknown if air bag module cover flap(s) damaged (7) Not deployed
38. Air Bag Deployment Accident Event Sequence Number (00) Not equipped/not available Code the accident event sequence number that initiated the air bag deployment (96) Deployed, unknown event (97) Not deployed (98) Unknown if deployed (99) Unknown	(8) Unknown if deployed (9) Unknown 43. Was There Damage To The Air Bag? (00) Not equipped/not available (01) Not damaged Yes - Air Bag Damage (02) Ruptured (03) Cut (04) Torn
39. CDC For Air Bag Deployment Impact (0) Not equipped/not available (1) Highest delta V (2) Second highest delta V (3) Other non-coded delta V (specify): (6) Deployed, unknown event (7) Not deployed (8) Unknown if deployed (9) Unknown	(05) Holed (06) Burned (07) Abraded (88) Other damage (specify): (95) Damaged, details unknown (96) Deployed, unknown if damaged (97) Not deployed (98) Unknown if deployed (99) Unknown

	FIRST SEAT FRONTAL AIR BAG SYSTEM	HEAD RESTRAINT AND SEAT EVALUATION
44.	Source of Air Bag Damage (00) Not equipped/not available (01) Not damaged (02) Object worn by occupant, (specify): (03) Object carried by occupant, (specify): (04) Adaptive/assistive controls, (specify): (05) Fire in vehicle (06) Thermal burns (07) Rescue or emergency efforts (88) Other damage source (specify):	49. Head Restraint Type/Damage by Occupant at This Occupant Position (0) No head restraints (1) Integral—no damage (2) Integral—damaged during accident (3) Adjustable—no damage (4) Adjustable—damaged during accident (5) Add-on—no damage (6) Add-on—damaged during accident (8) Other (specify): (9) Unknown 50. Seat Type (this Occupant Position) (00) Occupant not seated or no seat
45.	(95) Damaged, unknown source (96) Deployed, unknown if damaged (97) Not deployed (98) Unknown if deployed (99) Unknown Was The Air Bag Tethered? (0) Not equipped/not available (1) No (2) Yes (specify number of tether straps):	(01) Bucket (02) Bucket with folding back (03) Bench (04) Bench with separate back cushions (05) Bench with folding back(s) (06) Split bench with separate back cushions (07) Split bench with folding back(s) (08) Pedestal (i.e., column supported) (09) Box mounted seat (i.e., van type) (10) Other seat type (specify):
46.	(3) Deployed, unknown if tethered (7) Not deployed (8) Unknown if deployed (9) Unknown Did The Air Bag Have Vent Ports? (0) Not equipped/not available (1) No (2) Yes (specify number of vent ports):	(99) Unknown 51. Seat Orientation (this Occupant Position) (0) Occupant not seated or no seat (1) Forward facing seat (2) Rear facing seat (3) Side facing seat (inward) (4) Side facing seat (outward) (8) Other (specify):
	 (3) Deployed, unknown if vent ports present (7) Not deployed (8) Unknown if deployed (9) Unknown Was the Air Bag in this Occupant's Position	(9) Unknown 52. Seat Track Adjusted Position Prior To Impact (0) Occupant not seated or no seat (1) Non-adjustable seat track Adjustable Seat Track (2) Seat at forward most track position (3) Seat between forward most and middle track positions (4) Seat at middle track position (5) Seat between middle and rear most track positions (6) Seat at rear most track position (9) Unknown
	Was This Occupant Wearing Eye-wear? (0) Not equipped/not available (1) No (2) Eyeglasses/sunglasses (3) Contact lenses (4) Deployed, unknown if eyewear worn (7) Not deployed (8) Unknown if deployed (9) Unknown	

HEAD RESTRAINT AND SEAT EVALUATION continued

5

- 53. Seat Back Incline Prior and Post Impact
 - (00) Occupant not seated or no seat
 - (01) Not adjustable

Upright prior to impact

- (11) Moved to completely rearward position
- (12) Moved to rearward midrange position
- (13) Moved to slightly rearward position
- (14) Retained pre-impact position
- (15) Moved to slightly forward position
- (16) Moved to forward midrange position
- (17) Moved to completely forward position

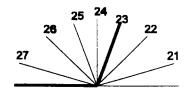
Slightly reclined prior to impact

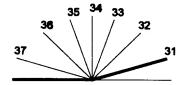
- (21) Moved to completely rearward position
- (22) Moved to rearward midrange position
- (23) Retained pre-impact position
- (24) Moved to upright position
- (25) Moved to slightly forward position
- (26) Moved to forward midrange position
- (27) Moved to completely forward position

Completely reclined prior to impact

- (31) Retained pre-impact position
- (32) Moved to rearward midrange position
- (33) Moved to slightly rearward position
- (34) Moved to upright position
- (35) Moved to slightly forward position
- (36) Moved to forward midrange position
- (37) Moved to completely forward position
- (99) Unknown
- 54. Seat Performance (this Occupant Position)
 - (0) Occupant not seated or no seat
 - (1) No seat performance failure(s)
 - (2) Seat adjusters failed
 - (3) Seat back folding locks or "seat back" failed (specify):____
 - (4) Seat track/anchors failed
 - (5) Deformed by impact of occupant
 - (6) Deformed by passenger compartment intrusion, (specify):
 - (7) Combination of above (specify):
 - (8) Other (specify):
 - (9) Unknown

15 14 13





			CHIL	D SAI	FET	TY SEAT	
55.		Safety Seat Make/Model No child safety seat	95	#	58.	58. Child Safety Seat Harness Usage	_
	Applio Data	cable codes are found in your NASS Collection, Coding and Editing Built-in child safety seat	CDS		59.	59. Child Safety Seat Shield Usage	3
	(997)	Other make/model (specify):			60.	60. Child Safety Seat Tether Usage	3
		Unknown make/model Unknown if child safety seat used				Note: Options below applicable to Variables OA58-OA60.	
56.	(0) N	of Child Safety Seat o child safety seat		2	ļ.	(00) No child safety seat	
	(2) T	ıfant seat oddler seat onvertible seat				Not Designed With Harness/Shield/Tether (01) After market harness/shield/tether added, not used	
	(5) B	ooster seat - with shield ooster seat - without shield				(02) After market harness/shield/tether used(03) Child safety seat used, but no after market	
	_	ther type child safety seat (specify): nknown child safety seat type				harness/shield/tether added (09) Unknown if harness/shield/tether added or used	
	(9) U	nknown if child safety seat used				Designed With Harness/Shield/Tether	
57 .		Safety Seat Orientation No child safety seat	_ф	2_		(11) Harness/shield/tether not used(12) Harness/shield/tether used(19) Unknown if harness/shield/tether used	
		ned for Rear Facing for This Age/Wo	eight			Unknown If Designed With Harness/Shield/Tether (21) Harness/shield/tether not used	•
		Forward facing				(21) Harness/shield/tether not used (22) Harness/shield/tether used	
	(08)	Other orientation (specify):				(29) Unknown if harness/shield/tether used	
	(09)	Unknown orientation				(99) Unknown if child safety seat used	
	(11)	ned For Forward Fac <mark>ing for This Ag</mark> e Rear facing	e/Weig	ht			
		Forward facing					
	(18)	Other orientation (specify):					
	(19)	Unknown orientation					
	Age/M	wn Design or Orientation For This leight, or Unknown Age/Weight					
		Rear facing Forward facing					
		Other orientation (specify):					
	(29) Ū	Unknown orientation	-				
	(99) l	Unknown if child safety seat used					

INJURY CONSEQUENCES	
61. Injury Severity (Police Rating) (0) O - No injury (1) C - Possible injury (2) B - Nonincapacitating injury (3) A - Incapacitating injury (4) K - Killed (5) U - Injury, severity unknown (6) Died prior to accident (9) Unknown 62. Treatment - Mortality (0) No treatment (1) Fatal	63. Type Of Medical Facility (for Initial Treatment) (0) Not treated at a medical facility (1) Trauma center (2) Hospital (3) Medical clinic (4) Physician's office (5) Treatment later at medical facility (8) Other (specify): (9) Unknown 64. Hospital Stay (00) Not HospitalizedCode the number of days (up through 60)
(2) Fatal - ruled disease (specify): Nonfatal (3) Hospitalization (4) Transported and released (5) Treatment at scene - nontransported (6) Treatment later (7) Treatment - other (specify): (8) Transported to a medical facility-unknown if treated (9) Unknown	that the occupant stayed in hospital. (61) 61 days or more (99) Unknown 65. Working Days Lost Code the number of days (up through 60) that the occupant lost from work due to the accident (00) No working days lost (61) 61 days or more (62) Fatally injured (97) Not working prior to accident (99) Unknown
OTOD W	

STOP WORK HERE

VARIABLES 66-74

INJURY CONSEQUENCES		TRAUMA DATA
66. Time to Death Code number of hours from time of accident to time of death up through 24 hours. If time of death is greater than 24 hours, code number of days. (Note: 1 day = 31, 2 days = 32, n days = 30 +n up through 30 days = 60) Not fatal (96) Fatal - ruled disease (99) Unknown	<u>4</u>	71. Glasgow Coma Scale (GCS) Score (at Medical Facility) (00) Not injured (01) Injured - not treated at medical facility (02) No GCS Score at medical facility (03-15) Code the actual value of the initial GCS Score recorded at medical facility. (97) Injured, details unknown (99) Unknown if injured
67. 1st Medically Reported Cause of Death 68. 2nd Medically Reported Cause of Death	4	72. Was the Occupant Given Blood? (1) No - blood not given (2) Yes - blood given (specify units):
69. 3rd Medically Reported Cause of DeathCode the Occupant Injury from line number(s) for the medically reported injury(s) which reportedly contributed to this occupant's death (00) Not fatal or no additional causes (96) Mode of death given but specific injuries are not linked to cause of death. (specify): (97) Other result (includes fatal ruled	4	(9) Unknown if blood given 73. Arterial Blood Gases (ABG) – HCO ₃
disease) (specify):		BELT USE DETERMINATION
70. Number of Recorded Injuries for This OccupantCode the actual number of injuries recorded for this occupant. (00) No recorded injuries (97) Injured, details unknown (99) Unknown if injured	L Q	74. Primary Source of Belt Use Determination (0) Not equipped/not available/destroyed or rendered inoperative (1) Vehicle inspection (2) Official injury data (3) Driver/occupant interview (8) Other (specify):

National Highway Traffic Safety

ational Highway Traffic Safety dministration	NATIONAL ACCIDENT SAMPLING SYS CRASHWORTHINESS DATA SYS
Primary Sampling Unit Number	OCCUPANT'S SEATING
2. Case Number - Stratum AB17	10. Occupant's Seat Position 23
3. Vehicle Number	Front Seat (11) Left side
4. Occupant Number <u>Ø 4</u>	(12) Middle (13) Right side
OCCUPANT'S CHARACTERISTICS	(14) Other (enecify):
5. Occupant's Age Code actual age at time of accident. (00) Less than one year old (specify by month): (97) 97 years and older (99) Unknown	(14) Other (specify)
Occupant's Sex (1) Male (2) Female-not reported pregnant (3) Female-pregnant-1st trimester(1st-3rd month) (4) Female-pregnant-2nd trimester(4th-6th month) (5) Female-pregnant-3rd trimester(7th-9th month) (6) Female-pregnant-term unknown (9) Unknown	Third Seat (31) Left side (32) Middle (33) Right side (34) Other (specify): (35) On or in the lap of another occupant Fourth Seat (41) Left side (42) Middle
7. Occupant's Height Code actual height to the nearest centimeter. (999) Unknowninches X 2.54 =centimeters	(43) Right side (44) Other (specify): (45) On or in the lap of another occupant (97) In or on unenclosed area (98) Other seat (specify): (99) Unknown
S. Occupant's Weight Code actual weight to the nearest kilogram. (999) Unknown pounds X .4536 =kilograms Occupant's Role (1) Driver (2) Passenger (9) Unknown	11. Occupant's Posture (0) Normal posture Abnormal posture (1) Kneeling or standing on seat (2) Lying on or across seat (3) Kneeling, standing or sitting in front of seat (4) Sitting sideways or turned to talk with another occupant or to look out a rear window (5) Sitting on a console (6) Lying back in a reclined seat position (7) Bracing with feet or hands on a surface in front of seat (8) Other abnormal posture (specify): (9) Unknown

EJECTION/ENTRAPMENT					
12. Ejection (0) No ejection (1) Complete ejection (2) Partial ejection (3) Ejection, unknown degree (9) Unknown	_φ_	15. Medium Status (Immediately Prior To Impact) φ (0) No ejection (1) Open (2) Closed (3) Integral structure (9) Unknown			
13. Ejection Area (0) No ejection (1) Windshield (2) Left front (3) Right front (4) Left rear (5) Right rear (6) Rear (7) Roof (8) Other area (e.g., back of pickup, etc.) (specify): (9) Unknown 14. Ejection Medium (0) No ejection (1) Door/hatch/tailgate (2) Nonfixed roof structure (3) Fixed glazing	<u>φ</u>	16. Entrapment (0) Not entrapped/exit not inhibited (1) Entrapped/pinned - mechanically restrained (2) Could not exit vehicle due to jammed doors, fire, etc. (specify): (9) Unknown 17. Occupant Mobility (0) Occupant fatal before removed from vehicle (1) Removed from vehicle while unconscious or disoriented (2) Removed from vehicle due to injuries (3) Exited vehicle with some assistance (4) Exited vehicle under own power (5) Occupant fully ejected			
(4) Nonfixed glazing (specify): (5) Integral structure (8) Other medium (specify): (9) Unknown		(9) Unknown			

	BELT SYSTE	M FUNCTION
18	Manual (Active) Belt System Availability (0) None available (1) Belt removed/destroyed (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt available—type unknown	22. Shoulder Belt Upper Anchorage Adjustment (0) No shoulder belt (1) No upper anchorage adjustment for shoulder belt Adjustable shoulder Belt Upper Anchorage (2) In full up position (3) In mid position (4) In full down position
	Integral Belt Partially Destroyed (6) Shoulder belt (lap belt destroyed/removed) (7) Lap belt (shoulder belt destroyed/removed) (8) Other belt (specify):	 (5) Position unknown (9) Unknown if position has adjustable upper anchorage adjustment
	(9) Unknown	23. Automatic (Passive) Belt System Availability/ Function
19	Manual (Active) Belt System Use (00) None used, not available, or belt removed/destroyed (01) Inoperative (specify):	 (0) Not equipped/not available (1) 2 point automatic belts (2) 3 point automatic belts (3) Automatic belts - type unknown Non-functional
	(02) Shoulder belt (03) Lap belt (04) Lap and shoulder belt (05) Belt used—type unknown (08) Other belt used (specify):	 (4) Automatic belts destroyed or rendered inoperative (9) Unknown 24. Automatic (Passive) Belt System Use (0) Not equipped/not available/destroyed or
	 (12) Shoulder belt used with child safety seat (13) Lap belt used with child safety seat (14) Lap and shoulder belt used with child safety seat 	rendered inoperative (1) Automatic belt in use (2) Automatic belt not in use (manually disconnected, motorized track inoperative) (specify): (3) Automatic belt use unknown
	(15) Belt used with child safety seat—type unknown (18) Other belt used with child safety seat	(9) Unknown
20	(specify): (99) Unknown if belt used Proper Use of Manual (Active) Belta	25. Automatic (Passive) Belt System Type (0) Not equipped/not available (1) Non-motorized system
20.	Proper Use of Manual (Active) Belts (0) None used or not available (1) Belt used properly (2) Belt used properly with child safety seat	(2) Motorized system (9) Unknown 26. Proper Use of Automatic (Passive) Belt System
	Beit Used Improperly (3) Shoulder belt worn under arm (4) Shoulder belt worn behind back or seat (5) Belt worn around more than one person (6) Lap belt worn on abdomen (7) Lap belt or lap and shoulder belt used	 (0) Not equipped/not available/not used (1) Automatic belt used properly (2) Automatic belt used properly with child safety seat Automatic Belt Used Improperly (3) Automatic shoulder belt worn under arm (4) Automatic shoulder belt worn behind back
	improperly with child safety seat (specify): (8) Other improper use of manual belt system (specify):	 (5) Automatic belt worn around more than one person (6) Lap portion of automatic belt worn
	(9) Unknown	on abdomen (7) Automatic lap and shoulder belt or
21.	Manual (Active) Belt Failure Modes During Accident	automatic shoulder belt used improperly with child safety seat (specify):
	 (0) No manual belt used or not available (1) No manual belt failure(s) (2) Torn webbing (stretched webbing not included) 	(8) Other improper use of automatic belt system (specify): (9) Unknown
	(2) Dealean Éireala na lakaturi i	27. Automatic (Passive) Belt Failure Modes During Accident (0) Not equipped/not available/not in use (1) No automatic belt failure(s) (2) Torn webbing (stretched webbing not included) (3) Broken buckle or latchplate (4) Upper anchorage separated
	(8) Other manual belt failure (specify):	(4) Upper anchorage separated(5) Other anchorage separated (specify):
	(9) Unknown	(6) Broken retractor(7) Combination of above (specify):(8) Other automatic belt failure (specify):
		(9) Unknown

POLICE REPORTED RESTRAINT USE	AIR BAG SYSTEM FUNCTION
28. Police Reported Belt Use (0) None used (1) Police did not indicate belt use (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt used, type not specified (6) Child safety seat (7) Automatic belt (8) Other type belt, (specify):	30. Frontal Air Bag System Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag Non-functional (2) Air bag disconnected (specify): (3) Air bag not reinstalled (9) Unknown
(9) Police indicated "unknown" 29. Police Reported Air Bag Availability/Function (0) No air bag available (1) Police did not indicate air bag availability/function (2) Deployed (3) Not deployed (4) Unknown if deployed (9) Police indicated "unknown"	 31. Frontal Air Bag System Deployment (This Occupant Position) (0) Not equipped/not available (1) Deployed during accident (as a result of impact) (2) Deployed inadvertently just prior to accident (3) Deployed, details unknown (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (5) Unknown if deployed (7) Nondeployed (9) Unknown
Check the Primary Source Used In Determining Belt Use. [] Not equipped/not available/destroyed or rendered inoperative [] Vehicle inspection [] Official injury data [] Driver/occupant interview [] Other (specify): /AL [] Unknown if belt used	32. Other Than First Seat Frontal Air Bag Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag Non-functional (2) Air bag disconnected (specify): (3) Air bag not reinstalled (9) Unknown Specify type of "other" air bag present: 33. Air Bag(s) Deployment, Other Than First Seat Frontal (This Occupant Position) (0) Not equipped with an "other" air bag (1) Deployed during accident (as a result of impact) (2) Deployed inadvertently just prior to accident (3) Deployed, details unknown (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (5) Unknown if deployed (7) Nondeployed (9) Unknown 34. Are There Indications of Air Bag System Failure? (This Occupant Position) (0) Not equipped/not available (1) No (2) Yes (specify): (9) Unknown

	FIRST SEAT FRONTAL AIR	BAG SYSTEM EVALUATION
35.	6. Had Vehicle Been in Previous Accident(s)? (0) Not equipped/not available (1) No previous accidents Yes (2) Previous accident(s) without deployment(s) (3) One previous accident with deployment (4) More than one previous accident with at least one deployment (8) Previous accidents, unknown deployment status (9) Unknown	40. Longitudinal Component of Delta V For Air Bag Deployment Impact (-000) Not equipped/not available Code the value of the delta V for the impact that initiated the air bag deployment (-996) Deployment, unknown longitudinal Delta V (-997) Not deployed (-998) Unknown if deployed (-999) Unknown
	Type of Air Bag (0) Not equipped/not available (1) Original manufacturer installed system (2) Retrofitted air bag (3) Replacement air bag (8) Unknown type of air bag (9) Unknown	 41. Did Air Bag Module Cover Flap(s) Open At Designated Tear Points? (0) Not equipped/not available (1) No (2) Yes (3) Deployed, unknown if flap(s) opened at designated tear points (7) Not deployed (8) Unknown if deployed (9) Unknown
	Had Any Prior Maintenance/Service Been Performed On This Air Bag System? (0) Not equipped/not available (1) No prior maintenance (2) Yes, prior maintenance (specify): (9) Unknown	42. Were Air Bag Module Cover Flap(s) Damaged? (0) Not equipped/not available (1) No (2) Yes (specify): (3) Deployed, unknown if air bag module cover flap(s) damaged (7) Not deployed (8) Unknown if deployed
-	Air Bag Deployment Accident Event Sequence Number (00) Not equipped/not available Code the accident event sequence number that initiated the air bag deployment (96) Deployed, unknown event (97) Not deployed (98) Unknown if deployed (99) Unknown CDC For Air Bag Deployment Impact	(8) Unknown if deployed (9) Unknown 43. Was There Damage To The Air Bag? (00) Not equipped/not available (01) Not damaged Yes - Air Bag Damage (02) Ruptured (03) Cut (04) Torn (05) Holed
((0) Not equipped/not available (1) Highest delta V (2) Second highest delta V (3) Other non-coded delta V (specify): (6) Deployed, unknown event (7) Not deployed	(06) Burned (07) Abraded (88) Other damage (specify): (95) Damaged, details unknown (96) Deployed, unknown if damaged (97) Not deployed
	(8) Unknown if deployed (9) Unknown	(98) Unknown if deployed (99) Unknown

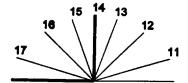
	FIRST SEAT FRONTAL AIR BAG SYST EVALUATION continued	T E. M	HEAD RESTRAINT AND SEAT EVALUATION
44.	Source of Air Bag Damage (00) Not equipped/not available (01) Not damaged (02) Object worn by occupant, (specify): (03) Object carried by occupant, (specify): (04) Adaptive/assistive controls, (specify): (05) Fire in vehicle (06) Thermal burns (07) Rescue or emergency efforts (88) Other damage source (specify): (95) Damaged, unknown source (96) Deployed, unknown if damaged (97) Not deployed	φ φ	49. Head Restraint Type/Damage by Occupant at This Occupant Position (0) No head restraints (1) Integral—no damage (2) Integral—damaged during accident (3) Adjustable—no damage (4) Adjustable—damaged during accident (5) Add-on—no damage (6) Add-on—damaged during accident (8) Other (specify): (9) Unknown 50. Seat Type (this Occupant Position) (00) Occupant not seated or no seat (01) Bucket (02) Bucket with folding back
45 .	(98) Unknown if deployed (99) Unknown Was The Air Bag Tethered? (0) Not equipped/not available (1) No (2) Yes (specify number of tether straps):	4	(03) Bench (04) Bench with separate back cushions (05) Bench with folding back(s) (06) Split bench with separate back cushions (07) Split bench with folding back(s) (08) Pedestal (i.e., column supported) (09) Box mounted seat (i.e., van type) (10) Other seat type (specify):
	(3) Deployed, unknown if tethered (7) Not deployed (8) Unknown if deployed (9) Unknown Did The Air Bag Have Vent Ports? (0) Not equipped/not available (1) No (2) Yes (specify number of vent ports):	4	(99) Unknown 51. Seat Orientation (this Occupant Position) (0) Occupant not seated or no seat (1) Forward facing seat (2) Rear facing seat (3) Side facing seat (inward) (4) Side facing seat (outward) (8) Other (specify):
47 .	 (3) Deployed, unknown if vent ports present (7) Not deployed (8) Unknown if deployed (9) Unknown Was the Air Bag in this Occupant's Position Contacted by Another Occupant? (0) Not equipped/not available (1) No (2) Yes (specify): (3) Deployed, unknown if other occupant conta air bag (7) Not deployed (8) Unknown if deployed 	ect to	(9) Unknown 52. Seat Track Adjusted Position Prior To Impact (0) Occupant not seated or no seat (1) Non-adjustable seat track Adjustable Seat Track (2) Seat at forward most track position (3) Seat between forward most and middle track positions (4) Seat at middle track position (5) Seat between middle and rear most track positions (6) Seat at rear most track position (9) Unknown
48. \	 (9) Unknown Was This Occupant Wearing Eye-wear? (0) Not equipped/not available (1) No (2) Eyeglasses/sunglasses (3) Contact lenses (4) Deployed, unknown if eyewear worn (7) Not deployed (8) Unknown if deployed (9) Unknown 	<u></u>	

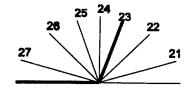
HEAD RESTRAINT AND SEATEVALUATION continued 53. Seat Back Incline Prior and Post Impact Ø 1 (00) Occupant not seated or no seat (01) Not adjustable Upright prior to impact (11) Moved to completely rearward position (12) Moved to rearward midrange position (13) Moved to slightly rearward position (14) Retained pre-impact position (15) Moved to slightly forward position (16) Moved to forward midrange position (17) Moved to completely forward position Slightly reclined prior to impact (21) Moved to completely rearward position (22) Moved to rearward midrange position (23) Retained pre-impact position (24) Moved to upright position (25) Moved to slightly forward position (26) Moved to forward midrange position (27) Moved to completely forward position Completely reclined prior to impact (31) Retained pre-impact position (32) Moved to rearward midrange position (33) Moved to slightly rearward position (34) Moved to upright position (35) Moved to slightly forward position (36) Moved to forward midrange position (37) Moved to completely forward position (99) Unknown 9 54. Seat Performance (this Occupant Position) (0) Occupant not seated or no seat (1) No seat performance failure(s) (2) Seat adjusters failed (3) Seat back folding locks or "seat back" failed (specify): (4) Seat track/anchors failed (5) Deformed by impact of occupant (6) Deformed by passenger compartment intrusion.

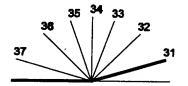
(specify):

(8) Other (specify): (9) Unknown

(7) Combination of above (specify):







	C	HILD SAI	AFETY SEAT	
55.	Child Safety Seat Make/Model 9 : 9 :	5 \$	_ 58. Child Safety Seat Harness Usage	2
	Applicable codes are found in your NASS CE Data Collection, Coding and Editing (950) Built-in child safety seat	os	59. Child Safety Seat Shield Usage	3_
	(997) Other make/model (specify):		60. Child Safety Seat Tether Usage $\frac{\varphi}{2}$	3
	(998) Unknown make/model (999) Unknown if child safety seat used		Note: Options below applicable to Variables OA58-OA60.	
56.	Type of Child Safety Seat (0) No child safety seat		(00) No child safety seat	
	(1) Infant seat(2) Toddler seat(3) Convertible seat		Not Designed With Harness/Shield/Tether (01) After market harness/shield/tether	
	(4) Booster seat - with shield (5) Booster seat - without shield		added, not used (02) After market harness/shield/tether used (03) Child safety seat used, but no after market	
	(7) Other type child safety seat (specify): (8) Unknown child safety seat type		harness/shield/tether added (09) Unknown if harness/shield/tether added or used	
	(9) Unknown if child safety seat used		Designed With Hamess/Shield/Tether	
57.	Child Safety Seat Orientation _ (00) No child safety seat	22	(11) Harness/shield/tether not used (12) Harness/shield/tether used (19) Unknown if harness/shield/tether used	
	Designed for Rear Facing for This Age/Weigh	nt :	Unknown If Designed With Hamess/Shield/Tether	
	(01) Rear facing (02) Forward facing (08) Other orientation (specify):		(21) Harness/shield/tether not used (22) Harness/shield/tether used	
	(09) Unknown orientation	-	(29) Unknown if harness/shield/tether used (99) Unknown if child safety seat used	
	Designed For Forward Facing for This Age/W	eight		
	11) Rear facing 12) Forward facing	. [
	18) Other orientation (specify):			
(19) Unknown orientation	-		
(Unknown Design or Orientation For This Age∕Weight, or Unknown Age∕Weight 21) Rear facing 22) Forward facing			
	28) Other orientation (specify):			
(29) Unknown orientation	}		
(99) Unknown if child safety seat used			

INJURY CONSEQUENCES	
61. Injury Severity (Police Rating) (0) O - No injury (1) C - Possible injury (2) B - Nonincapacitating injury (3) A - Incapacitating injury (4) K - Killed (5) U - Injury, severity unknown (6) Died prior to accident (9) Unknown	63. Type Of Medical Facility (for Initial Treatment) (0) Not treated at a medical facility (1) Trauma center (2) Hospital (3) Medical clinic (4) Physician's office (5) Treatment later at medical facility (8) Other (specify):
62. Treatment - Mortality (0) No treatment (1) Fatal (2) Fatal - ruled disease (specify): Nonfatal	64. Hospital Stay (00) Not Hospitalized Code the number of days (up through 60) that the occupant stayed in hospital. (61) 61 days or more (99) Unknown
(3) Hospitalization (4) Transported and released (5) Treatment at scene - nontransported (6) Treatment later (7) Treatment - other (specify): (8) Transported to a medical facility-unknown if treated (9) Unknown	65. Working Days Lost Code the number of days (up through 60) that the occupant lost from work due to the accident (00) No working days lost (61) 61 days or more (62) Fatally injured (97) Not working prior to accident (99) Unknown
0700 11/2	

STOP WORK HERE

VARIABLES 66-74

INJURY CONSEQUENCES	TRAUMA DATA
66. Time to Death Code number of hours from time of accident to time of death up through 24 hours. If time of death is greater than 24 hours, code number of days. (Note: 1 day = 31, 2 days = 32, n days = 30 + n up through 30 days = 60) (00) Not fatal (96) Fatal - ruled disease (99) Unknown	71. Glasgow Coma Scale (GCS) Score (at Medical Facility) (00) Not injured (01) Injured - not treated at medical facility (02) No GCS Score at medical facility (03-15) Code the actual value of the initial GCS Score recorded at medical facility. (97) Injured, details unknown (99) Unknown if injured
67. 1st Medically Reported Cause of Death Ψ φ 68. 2nd Medically Reported Cause of Death Ψ φ	72. Was the Occupant Given Blood? (1) No - blood not given (2) Yes - blood given (specify units): (9) Unknown if blood given
69. 3rd Medically Reported Cause of Death Code the Occupant Injury from line number(s) for the medically reported injury(s) which reportedly contributed to this occupant's death (00) Not fatal or no additional causes (96) Mode of death given but specific injuries are not linked to cause of death. (specify):	73. Arterial Blood Gases (ABG) – HCO ₃ 97 (00) Not injured (01) Injured, ABGs not measured or reported (02-50) Code the actual value of the HCO ₃ (96) ABGs reported, HCO ₃ unknown (97) Injured, details unknown (99) Unknown if injured
(97) Other result (includes fatal ruled disease) (specify):	BELT USE DETERMINATION
70. Number of Recorded Injuries for This Occupant Code the actual number of injuries recorded for this occupant. (00) No recorded injuries (97) Injured, details unknown (99) Unknown if injured	74. Primary Source of Belt Use Determination (0) Not equipped/not available/destroyed or rendered inoperative (1) Vehicle inspection (2) Official injury data (3) Driver/occupant interview (8) Other (specify):

BEST AVAILABLE

Injury

Form Approved O.M.B. No. 2127-0021

Occupant

National Highway Traffic Safety Administration

OCCUPANT INJURY FORM

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number 3. Vehicle Number 4. Occupant Number 4. Occupant Number 4.

INJURY DATA

Record below the actual injuries sustained by this occupant that were identified from the official and unofficial data sources. Remember not to double count an injury just because it was identified from two different sources. If greater than ten injuries have been documented, encode the balance on the Occupant Injury Supplement.

A.I.S. - 90

	Source of Injury Data	Body Region	Type of Anatomic Structure	c Anatomic	Level of Injury	A.I.S. Severity	Aspec	:t	Injury Source	Source Confidence Level	Direct/ e Indirect Injury	Area Intrusion Number
1st	5. <u>7</u>	6	7. <u>5</u>	8. <u>04</u>	9. <u>4 4</u>	102	11. <u></u>	12.	697	13. 9	14.7	15. <u>4 4</u>
2nd	16	17	18	19	20	21	22	23.		24	25	26
3rd	27	28	29	30	31	32	33	34.		36	36	37
4th	38	39	40	41	42	43	44	45.		46	47	48
5th	49	50	51	52	53	54	55	5 6.		57	58	59
6th	60	61,	62	63	64	65	66	67.		. 68	69	70
7th	71	72	73	74	75	76	77	78.		79	80	81,
8th	82	83	84	85	86	87	88	89.		. 90	91	92
9th	93	94	95	96	97	98	99	100.		101	102	103

108

105._

__ 106.

10th

					UPANT	INJURY	DATA				
	Source of Injury Data	Body Region	Type of Anatomic Structure	A.I.S 90 Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect	Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion Number
11th			_			_	_		_		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
12th	_		_			_			-		
13th	_	_				_					
14th		_	_			_	_				
15th											
16th											
17th											
18th						1					-
19th			_						_		
20th	-	-	_			_	_				
21 s i			 .			-	<u></u>				
22nd	_								<u>. </u>	_	, *
23rd							-		_		***************************************
24th											
25th									•••••		-

OCCUPANT INJURY CLASSIFICATION

Body Region

- Head
- Face
- Neck
- **Thorax**
- (2) (3) (4) (5) (6) Abdomen
- Spine
- Upper Extremity
- (8)Lower Extremity
- Unspecified

Type of Anatomic Structure

- Whole Area
- (2) (3) (4) Vessels
- Nerves
- Organs (includes Muscles/ligaments)
- (5) Skeletal (includes ioints)
- Head LOC
- **(9)** Skin

Specific Anatomic Structure

Vessels, Nerves, Organs. Bones, Joints are assigned consecutive two digit numbers beginning with 02.

The exceptions to this rule apply to:

Whole Area

- (02) Skin Abrasion
- (04) Skin Contusion
- (06) Skin - Laceration
- (80)Skin - Avulsion
- (10)Amputation
- (20)Burn
- Crush (30)
- Degloving (40)
- (50) Injury - NFS
- (90)Trauma, other than mechanical

Head - LOC

- (02) Length of LOC
- (04) Level
- (06)
- (08) Consciousness
- (10) Concussion

Spine

- (02)Cervical
- (04)Thoracic
- (06) Lumbar

Level of Injury

Specific injuries are assigned consecutive two-digit numbers beginning with 02.

To the extent possible, within the organizational framework of the AIS, 00 is assigned to an injury NFS as to severity or where only one injury is given in the dictionary for that anatomic structure. 99 is assigned to any injury NFS as to lesion or severity.

Abbreviated Injury Scale

- Minor Injury
- Moderate Injury
- Serious Injury
- Severe Injury
- (2) (3) (4) (5) (6) Critical Injury
- Maximum (untreatable)
- Injured, unknown severity

Aspect

- Right
 - Left
- (2) (3) Bilateral (4)
 - Central
- (5) Anterior
- (6) **Posterior** Superior
- (7) (8) Inferior
 - Unknown
- (9)
 - Whole region

SOURCE OF INJURY DATA

OFFICIAL RECORDS

- (1) Autopsy records with or without hospital/medical records
- (2) Hospital/medical records other than emergency room (e.g., discharge summary)
- (3) Emergency room records only (including associated X-rays or other lab reports)
- (4) Private physician, walk-in or emergency clinic

UNOFFICIAL RECORDS

- (5) Lay coroner report
- (6) E.M.S. personnel
- (7) Interviewee
- (8) Other source (specify):
- (9) Police

DIRECT/INDIRECT INJURY

CONFIDENCE LEVEL

INJURY SOURCE

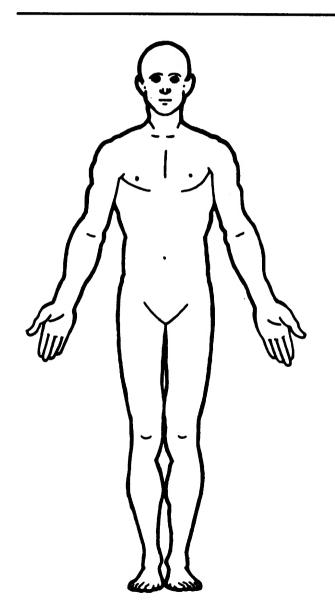
- (1) Certain
- (2) Probable
- (3) Possible
- (9) Unknown

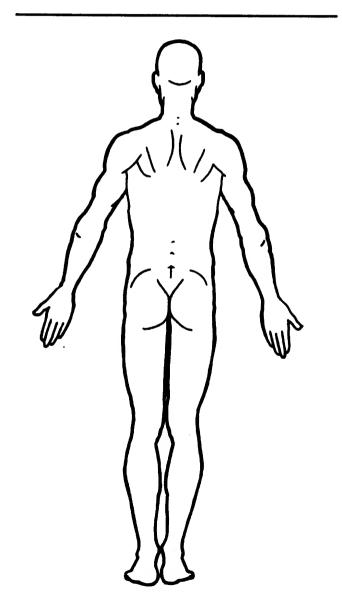
- Direct contact injury
 - Indirect contact injury
 - (2) (3) Noncontact injury
 - Injured, unknown source

INJURY SOURCES FRONT (102) Right side hardware or (183) Air bag-passenger side and (411) Wall mounted head rest (used (001) Windshield object held behind wheel chair) (103)(412) Other adaptive device (002)Mirror Right A (A1/A2)-pillar (184) Air bag-passenger side and Right B-pillar (003)Sunvisor (104)object in mouth (specify):_ (004)Steering wheel rim (105) Other right pillar (specify): (185) Air bag compartment (005) Steering wheel hub/spoke cover-passenger side (006)Steering wheel (combination (106)Right side window glass (186) Air bag compartment **EXTERIOR of OCCUPANT'S** of codes 004 and 005) (107) Right side window frame VEHICLE cover-passenger side and (007)Steering column, transmission (108)Right side window sill (451) Hood evewear selector lever, other (109)Right side window glass (187) Air bag compartment (452)Outside hardware (e.g., attachment including one or more of the cover-passenger side and outside mirror, antenna) (008) Cellular telephone or CB radio (453)following: frame, window sill. iewelry Other exterior surface or tires Add on equipment (e.g., tape A (A1/A2)-pillar, B-pillar, or (009)(188) Air bag compartment (specify): deck, air conditioner) roof side rail. cover-passenger side and (010) Left instrument panel and (110) Other right side object object held (454) Unknown exterior objects below (specify): (189) Air bag compartment (011) Center instrument panel and EXTERIOR OF OTHER MOTOR cover-passenger side and VEHICLE below object in mouth (012)Right instrument panel and INTERIOR (501) Front bumper (190) Other air bag (specify) below (151) Seat, back support (502)Hood edge (013) Glove compartment door (152) Belt restraint webbing/buckle (195) Other air bag compartment (503) Other front of vehicle (014) Knee boister (153) Belt restraint B-pillar or door (specify): cover (specify) (015) Windshield including one or frame attachment point more of the following: front (154) Other restraint system (504) Hood header, A (A1/A2)-pillar, component (specify): ROOF (505) Hood ornament instrument panel, mirror, or (201) Front header (506)Windshield, roof rail, A-pillar (155) (507) steering assembly (driver side Head restraint system (202) Rear header Side surface Roof left side rail only) (160) Other occupants (specify): (203)(508)Side mirrors (016) Windshield including one or Roof right side rail (509)Other side protrusions (204)more of the following: front Interior loose objects (205)Roof or convertible top (specify): header, A (A1/A2)-pillar, (162) Child safety seat (specify): instrument panel, or mirror FLOOR (510) Rear surface (passenger side only) (163) Other interior object (specify): (251) Floor (including toe pan) (511) Undercarriage (017) Windshield reinforced by Tires and wheels (252) Floor or console mounted (512) exterior object (specify) transmission lever, including (513) Other exterior of other motor AIR BAG vehicle (specify): (019) Other front object (specify): (170) Air bag-driver side (253) Parking brake handle (171) Air bag-driver side and (254) Foot controls including (514) Unknown exterior of other evewear parking brake motor vehicle LEFT SIDE (172)Air bag-driver side and jewelry (051) Left side interior surface, (173) Air bag-driver side and object REAR OTHER VEHICLE OR OBJECT IN excluding hardware or Backlight (rear window) THE ENVIRONMENT (301) armrests (174) Air bag-driver side and object Backlight storage rack, (551) Ground (302)(052) Left side hardware or armrest (598) Other vehicle or object in mouth door, etc. (053) Left A (A1/A2)-pillar (175) Air bag compartment (303) Other rear object (specify): (specify): (054) Left B-pillar cover-driver side (055) Other left pillar (specify): (176) Air bag compartment (599) Unknown vehicle or object cover-driver side and eyewear ADAPTIVE (ASSISTIVE) DRIVING (177) Air bag compartment (056) Left side window glass **EQUIPMENT** NONCONTACT INJURY (057) Left side window frame cover-driver side and jewelry (401) Hand controls for (601) Fire in vehicle (058) Left side window sill (178) Air bag compartment braking/acceleration (602) Flying glass · (059) Left side window glass cover-driver side and object (402) Steering control devices (603) Other noncontact injury including one or more of the (attached to OEM steering held source following: frame, window sill. (179) Air bag compartment wheel) (specify): A (A1/A2)-pillar, B-pillar, or (604) Air bag exhaust gases cover-driver side and object in (403) Steering knob attached to roof side rail. steering wheel (697) Injured, unknown source (060) Other left side object (180)Air bag-passenger side Replacement steering wheel (specify): (181) Air bag-passenger side and (i.e., reduced diameter) (406)Joy stick steering controls (182) Wheelchair tie-downs Air bag-passenger side and (407) RIGHT SIDE iewelry (408)Modification to seat belts. (101) Right side interior surface, (specify):_ excluding hardware or Additional or relocated armrests switches, (specify): (410) Raised roof

OFFICIAL INJURY DATA — SOFT TISSUE INJURIES

Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)

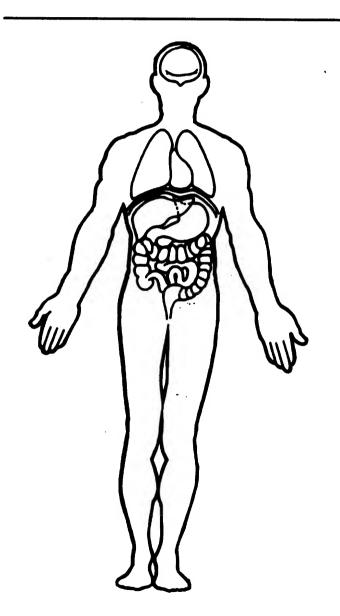


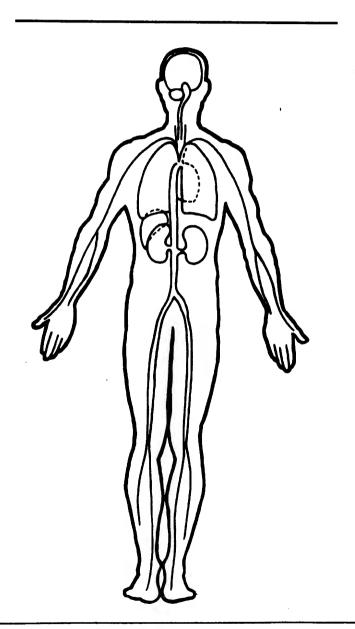


OFFICIAL INJURY DATA — SKELETAL INJURIES	
Restrained?	
No Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)	
Blood Alcohol Level (mg/dl) BAL =	
Glasgow Coma Scale Score	i
GCSS =	
Units of Blood Given Units =	
Arterial Blood Gases pH =	
PO ₂ = PCO ₂	
нсо,	

OFFICIAL INJURY DATA —INTERNAL INJURIES

Indicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and Source of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are unavailable.)





National Accident Sampling System-Crashworthiness Data System: Occupant Injury Form

OCCUPANT INJURY DATA SUPPLEMENT											
	Source of Injury Data	Body Region	Type of Anatomic Structure	A.I.S Specific Anatomic Structure	90 Level of Injury	A.I.S. Severity	Aspect	injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupan Area Intrusion Number
		_									
	_	_	_			_				_	
		_								_	
		_	_			_					
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OCCUPANT ASSESSMENT FORM U.S. Department of Transportation

Form Approved O.M.B. No. 2127-0021

National Highway Traffic Safety Administration	NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM
Primary Sampling Unit Number	OCCUPANT'S SEATING
2. Case Number - Stratum AB17	10. Occupant's Seat Position 3 4
3. Vehicle Number	(11) Left side
4. Occupant Number 4 5	(12) Middle (13) Right side
OCCUPANT'S CHARACTERISTICS	(14) Other (specify):
5. Occupant's Age Code actual age at time of accident. (00) Less than one year old (specify by month): (97) 97 years and older (99) Unknown 6. Occupant's Sex (1) Male (2) Female-not reported pregnant (3) Female-pregnant-1st trimester(1st-3rd month) (4) Female-pregnant-2nd trimester(4th-6th month) (5) Female-pregnant-term unknown (9) Unknown 7. Occupant's Height Code actual height to the nearest centimeter. (999) Unknown inches X 2.54 =centimeters 8. Occupant's Weight Code actual weight to the nearest kilogram. (999) Unknown pounds X .4536 =kilograms 9. Occupant's Role (1) Driver (2) Passenger (9) Unknown	(15) On or in the lap of another occupant Second Seat (21) Left side (22) Middle (23) Right side (24) Other (specify): (25) On or in the lap of another occupant Third Seat (31) Left side (32) Middle (33) Right side (34) Other (specify): (35) On or in the lap of another occupant Fourth Seat (41) Left side (42) Middle (43) Right side (44) Other (specify): (45) On or in the lap of another occupant (97) In or on unenclosed area (98) Other seat (specify): (99) Unknown 11. Occupant's Posture (0) Normal posture (1) Kneeling or standing on seat (2) Lying on or across seat (3) Kneeling, standing or sitting in front of seat (4) Sitting sideways or turned to talk with another occupant or to look out a rear window (5) Sitting on a console (6) Lying back in a reclined seat position (7) Bracing with feet or hands on a surface in front of seat (8) Other abnormal posture (specify): (9) Unknown

EJI	ECTION/E	NTRAPMENT
12. Ejection (0) No ejection (1) Complete ejection (2) Partial ejection (3) Ejection, unknown degree (9) Unknown	4	15. Medium Status (Immediately Prior To Impact) (0) No ejection (1) Open (2) Closed (3) Integral structure (9) Unknown
13. Ejection Area (0) No ejection (1) Windshield (2) Left front (3) Right front (4) Left rear (5) Right rear (6) Rear (7) Roof (8) Other area (e.g., back of pickup, etc.) (specify): (9) Unknown	4	16. Entrapment (0) Not entrapped/exit not inhibited (1) Entrapped/pinned - mechanically restrained (2) Could not exit vehicle due to jammed doors, fire, etc. (specify): (9) Unknown 17. Occupant Mobility (0) Occupant fatal before removed from vehicle (1) Removed from vehicle while unconscious or
14. Ejection Medium (0) No ejection (1) Door/hatch/tailgate (2) Nonfixed roof structure (3) Fixed glazing (4) Nonfixed glazing (specify): (5) Integral structure (8) Other medium (specify):	<u>\$</u>	disoriented (2) Removed from vehicle due to injuries (3) Exited vehicle with some assistance (4) Exited vehicle under own power (5) Occupant fully ejected (9) Unknown

	BELT SYSTI	EM F	UNCTION
18. Manual (Active) Belt Syste (0) None available (1) Belt removed/destrot (2) Shoulder belt (3) Lap belt (4) Lap and shoulder be (5) Belt available—type	ved	22.	Shoulder Belt Upper Anchorage Adjustment (0) No shoulder belt (1) No upper anchorage adjustment for shoulder belt Adjustable shoulder Belt Upper Anchorage (2) In full up position (3) In mid position
Integral Belt Partially Dest (6) Shoulder belt (lap be) (7) Lap belt (shoulder be) (8) Other belt (specify): (9) Unknown 19 Manual (Active) Belt Syste (00) None used, not availate removed/destroyed (01) Inoperative (specify) (02) Shoulder belt (03) Lap belt (04) Lap and shoulder be) (05) Belt used—type unk (08) Other belt used (specify) (12) Shoulder belt used (specify) (13) Lap belt used with clid (specify) (14) Lap and shoulder be) safety seat (15) Belt used with child specify (specify)	It destroyed/removed) It destroyed/removed)		(4) In full down position (5) Position unknown (9) Unknown if position has adjustable upper anchorage adjustment Automatic (Passive) Belt System Availability/ Function (0) Not equipped/not available (1) 2 point automatic belts (2) 3 point automatic belts (3) Automatic belts - type unknown Non-functional (4) Automatic belts destroyed or rendered inoperative (9) Unknown Automatic (Passive) Belt System Use (0) Not equipped/not available/destroyed or rendered inoperative (1) Automatic belt in use (2) Automatic belt not in use (manually disconnected, motorized track inoperative) (specify): (3) Automatic belt use unknown (9) Unknown
(18) Other belt used with (specify): (99) Unknown if belt used 20. Proper Use of Manual (Act (0) None used or not ava (1) Belt used properly (2) Belt used properly wit **Belt Used Improperly** (3) Shoulder belt worn un (4) Shoulder belt worn be (5) Belt worn around mor (6) Lap belt worn on abdo (7) Lap belt or lap and sh improperly with child s (8) Other improper use of (specify):	der arm hind back or seat et than one person omen oulder belt used eafety seat (specify):	26.	Automatic (Passive) Belt System Type (0) Not equipped/not available (1) Non-motorized system (2) Motorized system (9) Unknown Proper Use of Automatic (Passive) Belt System (0) Not equipped/not available/not used (1) Automatic belt used properly (2) Automatic belt used properly with child safety seat Automatic Belt Used Improperly (3) Automatic shoulder belt worn under arm (4) Automatic shoulder belt worn behind back (5) Automatic belt worn around more than one person (6) Lap portion of automatic belt worn on abdomen
(9) Unknown 21. Manual (Active) Belt Failur During Accident (0) No manual belt used of (1) No manual belt failure (2) Torn webbing (stretch included) (3) Broken buckle or latch (4) Upper anchorage sepa (5) Other anchorage sepa (6) Broken retractor (7) Combination of above (8) Other manual belt failure (9) Unknown	or not available (s) ed webbing not aplate arated urated (specify): (specify):	27.	(7) Automatic lap and shoulder belt or automatic shoulder belt used improperly with child safety seat (specify): (8) Other improper use of automatic belt system (specify): (9) Unknown Automatic (Passive) Belt Failure Modes During Accident (0) Not equipped/not available/not in use (1) No automatic belt failure(s) (2) Torn webbing (stretched webbing not included) (3) Broken buckle or latchplate (4) Upper anchorage separated (5) Other anchorage separated (5) Other anchorage separated (specify): (6) Broken retractor (7) Combination of above (specify): (8) Other automatic belt failure (specify):
			(9) Unknown

POLICE REPORTED RESTRAINT USE	AIR BAG SYSTEM FUNCTION
28. Police Reported Belt Use (0) None used (1) Police did not indicate belt use (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt used, type not specified (6) Child safety seat (7) Automatic belt (8) Other type belt, (specify):	30. Frontal Air Bag System Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag Non-functional (2) Air bag disconnected (specify): (3) Air bag not reinstalled (9) Unknown
 (9) Police indicated "unknown" 29. Police Reported Air Bag Availability/Function (0) No air bag available (1) Police did not indicate air bag availability/function (2) Deployed (3) Not deployed (4) Unknown if deployed (9) Police indicated "unknown" 	 31. Frontal Air Bag System Deployment (This Occupant Position) (0) Not equipped/not available (1) Deployed during accident (as a result of impact) (2) Deployed inadvertently just prior to accident (3) Deployed, details unknown (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (5) Unknown if deployed (7) Nondeployed (9) Unknown
Check the Primary Source Used In Determining Belt Use. [] Not equipped/not available/destroyed or rendered inoperative [] Vehicle inspection [] Official injury data [] Driver/occupant interview [] Other (specify):	32. Other Than First Seat Frontal Air Bag Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag Non-functional (2) Air bag disconnected (specify): (3) Air bag not reinstalled (9) Unknown Specify type of "other" air bag present: 33. Air Bag(s) Deployment, Other Than First
	Seat Frontal (This Occupant Position) (0) Not equipped with an "other" air bag (1) Deployed during accident (as a result of impact) (2) Deployed inadvertently just prior to accident (3) Deployed, details unknown (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (5) Unknown if deployed (7) Nondeployed (9) Unknown
	Failure? (This Occupant Position) (0) Not equipped/not available (1) No (2) Yes (specify): (9) Unknown

FIRST SEAT FRONTAL AIR	BAG SYSTEM EVALUATION
35. Had Vehicle Been in Previous Accident(s)? (0) Not equipped/not available (1) No previous accidents Yes (2) Previous accident(s) without deployment(s) (3) One previous accident with deployment (4) More than one previous accident with at least one deployment (8) Previous accidents, unknown deployment status (9) Unknown	40. Longitudinal Component of Delta V For Air Bag Deployment Impact (-000) Not equipped/not available Code the value of the delta V for the impact that initiated the air bag deployment (-996) Deployment, unknown longitudinal Delta V (-997) Not deployed (-998) Unknown if deployed (-999) Unknown
36. Type of Air Bag (0) Not equipped/not available (1) Original manufacturer installed system (2) Retrofitted air bag (3) Replacement air bag (8) Unknown type of air bag (9) Unknown	41. Did Air Bag Module Cover Flap(s) Open At Designated Tear Points? (0) Not equipped/not available (1) No (2) Yes (3) Deployed, unknown if flap(s) opened at designated tear points (7) Not deployed (8) Unknown if deployed (9) Unknown
37. Had Any Prior Maintenance/Service Been Performed On This Air Bag System? (0) Not equipped/not available (1) No prior maintenance (2) Yes, prior maintenance (specify): (9) Unknown	42. Were Air Bag Module Cover Flap(s) Damaged? (0) Not equipped/not available (1) No (2) Yes (specify): (3) Deployed, unknown if air bag module cover flap(s) damaged (7) Not deployed (8) Unknown if deployed
38. Air Bag Deployment Accident Event Sequence Number (00) Not equipped/not available Code the accident event sequence number that initiated the air bag deployment (96) Deployed, unknown event (97) Not deployed (98) Unknown if deployed (99) Unknown	(9) Unknown 43. Was There Damage To The Air Bag? (00) Not equipped/not available (01) Not damaged Yes - Air Bag Damage (02) Ruptured (03) Cut (04) Torn
39. CDC For Air Bag Deployment Impact (0) Not equipped/not available (1) Highest delta V (2) Second highest delta V (3) Other non-coded delta V (specify): (6) Deployed, unknown event (7) Not deployed (8) Unknown if deployed (9) Unknown	(05) Holed (06) Burned (07) Abraded (88) Other damage (specify): (95) Damaged, details unknown (96) Deployed, unknown if damaged (97) Not deployed (98) Unknown if deployed (99) Unknown

	FIRST SEAT FRONTAL AIR BAG SYSTEM EVALUATION continued	HEAD RESTRAINT AND SEAT EVALUATION
44.	Source of Air Bag Damage (00) Not equipped/not available (01) Not damaged (02) Object worn by occupant, (specify): (03) Object carried by occupant, (specify): (04) Adaptive/assistive controls, (specify): (05) Fire in vehicle (06) Thermal burns	49. Head Restraint Type/Damage by Occupant at This Occupant Position (0) No head restraints (1) Integral—no damage (2) Integral—damaged during accident (3) Adjustable—no damage (4) Adjustable—damaged during accident (5) Add-on—no damage (6) Add-on—damaged during accident (8) Other (specify):
	(07) Rescue or emergency efforts (88) Other damage source (specify):	(9) Unknown 50. Seat Type (this Occupant Position) 4 5
	 (95) Damaged, unknown source (96) Deployed, unknown if damaged (97) Not deployed (98) Unknown if deployed (99) Unknown 	 (00) Occupant not seated or no seat (01) Bucket (02) Bucket with folding back (03) Bench (04) Bench with separate back cushions (05) Bench with folding back(s) (06) Split bench with separate back cushions
45.	Was The Air Bag Tethered? (0) Not equipped/not available (1) No (2) Yes (specify number of tether straps):	(07) Split bench with folding back(s) (08) Pedestal (i.e., column supported) (09) Box mounted seat (i.e., van type) (10) Other seat type (specify): (99) Unknown
	(3) Deployed, unknown if tethered(7) Not deployed(8) Unknown if deployed(9) Unknown	51. Seat Orientation (this Occupant Position) (0) Occupant not seated or no seat (1) Forward facing seat
46.	Did The Air Bag Have Vent Ports? (0) Not equipped/not available (1) No (2) Yes (specify number of vent ports):	(2) Rear facing seat (3) Side facing seat (inward) (4) Side facing seat (outward) (8) Other (specify):
	(3) Deployed, unknown if vent ports present(7) Not deployed(8) Unknown if deployed(9) Unknown	(9) Unknown 52. Seat Track Adjusted Position Prior To Impact (0) Occupant not seated or no seat
47.	Was the Air Bag in this Occupant's Position Contacted by Another Occupant? (0) Not equipped/not available (1) No (2) Yes (specify): (3) Deployed, unknown if other occupant contact to	 (1) Non-adjustable seat track Adjustable Seat Track (2) Seat at forward most track position (3) Seat between forward most and middle track positions (4) Seat at middle track position (5) Seat between middle and rear most track
	air bag (7) Not deployed (8) Unknown if deployed (9) Unknown	positions (6) Seat at rear most track position (9) Unknown
	Was This Occupant Wearing Eye-wear? (0) Not equipped/not available (1) No (2) Eyeglasses/sunglasses (3) Contact lenses (4) Deployed, unknown if eyewear worn (7) Not deployed (8) Unknown if deployed (9) Unknown	

HEAD RESTRAINT AND SEAT EVALUATION continued

8

- 53. Seat Back Incline Prior and Post Impact
- 99 (00) Occupant not seated or no seat
 - (01) Not adjustable

Upright prior to impact

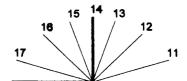
- (11) Moved to completely rearward position
- (12) Moved to rearward midrange position
- (13) Moved to slightly rearward position
- (14) Retained pre-impact position
- (15) Moved to slightly forward position
- (16) Moved to forward midrange position
- (17) Moved to completely forward position

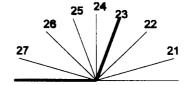
Slightly reclined prior to impact

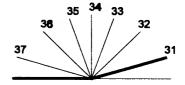
- (21) Moved to completely rearward position
- (22) Moved to rearward midrange position
- (23) Retained pre-impact position
- (24) Moved to upright position
- (25) Moved to slightly forward position
- (26) Moved to forward midrange position
- (27) Moved to completely forward position

Completely reclined prior to impact

- (31) Retained pre-impact position
- (32) Moved to rearward midrange position
- (33) Moved to slightly rearward position
- (34) Moved to upright position
- (35) Moved to slightly forward position
- (36) Moved to forward midrange position
- (37) Moved to completely forward position
- (99) Unknown
- 54. Seat Performance (this Occupant Position)
 - (0) Occupant not seated or no seat
 - (1) No seat performance failure(s)
 - (2) Seat adjusters failed
 - (3) Seat back folding locks or "seat back" failed (specify):
 - (4) Seat track/anchors failed
 - (5) Deformed by impact of occupant
 - (6) Deformed by passenger compartment intrusion, (specify):
 - (7) Combination of above (specify):
 - (8) Other (specify): DEFORMED BY CARGO
 - (9) Unknown







58. Child Safety Seat Harness Usage
59. Child Safety Seat Shield Usage # #
60. Child Safety Seat Tether Usage A 4 Note: Options below applicable to Variables OA58-OA60.
 (00) No child safety seat Not Designed With Harness/Shield/Tether (01) After market harness/shield/tether added, not used (02) After market harness/shield/tether used (03) Child safety seat used, but no after market harness/shield/tether added (09) Unknown if harness/shield/tether added or used Designed With Harness/Shield/Tether (11) Harness/shield/tether not used
(12) Harness/shield/tether used (19) Unknown if harness/shield/tether used Unknown if Designed With Harness/Shield/Tether (21) Harness/shield/tether not used (22) Harness/shield/tether used (29) Unknown if harness/shield/tether used (99) Unknown if child safety seat used

INJURY CONSEQUENCES											
(0) O - No injury (1) C - Possible injury (2) B - Nonincapacitating injury (3) A - Incapacitating injury (4) K - Killed (5) U - Injury, severity unknown (6) Died prior to accident (9) Unknown 62. Treatment - Mortality (0) No treatment (1) Fatal (2) Fatal - ruled disease (specify): Nonfatal (3) Hospitalization (4) Transported and released (5) Treatment at scene - nontransported (6) Treatment later (7) Treatment - other (specify): (8) Transported to a medical facility-unknown if treated (9) Unknown	63. Type Of Medical Facility (for Initial Treatment) (0) Not treated at a medical facility (1) Trauma center (2) Hospital (3) Medical clinic (4) Physician's office (5) Treatment later at medical facility (8) Other (specify): (9) Unknown 64. Hospital Stay (00) Not Hospitalized Code the number of days (up through 60) that the occupant stayed in hospital. (61) 61 days or more (99) Unknown 65. Working Days Lost Code the number of days (up through 60) that the occupant lost from work due to the accident (00) No working days lost (61) 61 days or more (62) Fatally injured (97) Not working prior to accident (99) Unknown										

STOP WORK HERE

VARIABLES 66-74

TRAUMA DATA
71. Glasgow Coma Scale (GCS) Score (at Medical Facility) (00) Not injured (01) Injured - not treated at medical facility (02) No GCS Score at medical facility (03-15) Code the actual value of the initial GCS Score recorded at medical facility. (97) Injured, details unknown (99) Unknown if injured
72. Was the Occupant Given Blood? (1) No - blood not given
(2) Yes - blood given (specify units): (9) Unknown if blood given
73. Arterial Blood Gases (ABG) – HCO ₃ (00) Not injured (01) Injured, ABGs not measured or reported (02-50) Code the actual value of the HCO ₃ (96) ABGs reported, HCO ₃ unknown (97) Injured, details unknown (99) Unknown if injured
BELT USE DETERMINATION
74. Primary Source of Belt Use Determination (0) Not equipped/not available/destroyed or rendered inoperative (1) Vehicle inspection (2) Official injury data (3) Driver/occupant interview (8) Other (specify):

U.S. Department of Transportation

OCCUPANT INJURY FORM

BEST AVAILABLE

Form Approved O.M.B. No. 2127-0021

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number

3. Vehicle Number

2. Case Number - Stratum

National Highway Traffic Safety Administration

AB

4. Occupant Number

INJURY DATA

Record below the actual injuries sustained by this occupant that were identified from the official and unofficial data sources. Remember not to double count an injury just because it was identified from two different sources. If greater than ten injuries have been documented, encode the balance on the Occupant Injury Supplement.

	_		A.I.S 90							Injury		Occupant
	Source of Injury Data	Body Region	Type of Anatomic Structure	Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspec	ot .	Injury Source	Source Confidence Level	Direct/ Indirect Injury	
1st	5. <u>7</u>	5. <u>9</u>	7 <u>.5</u>	8 <u>54</u>	s. <u>99</u>	10. 7	11. <u>9</u>	12.	097	13. 9	147	15. 4 4
2nd	16	17	18	19	20	21	22	23.		24	25	26
3rd	27	28	29 :	30	31	32	33	34.		35	36	37
4th	38	39,	40	11	42	43	44	45.		46	47	48
5th	49	50	51	32	53	54	55	5 6		57	58	59
6th	60	61	62 (33	54	65	66	67.		68	69	70
7th	71	72	73 :	⁷ 4	75	76	π	78.		79	80	81
8th	82	83	84 (15	85	87	88	89		90:	91	82
9th	93	94	95 9	v6	97	98	99	100.		181 1	02	103
10th	104	105 1	10610	7	108	109	110	111.		112 1	13	114

	OCCUPANT INJURY DATA A.I.S 90 Injury										0.5
	Source of Injury Data	Body Region	Type of Anatomic Structure	Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect	Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion Number
11th							_				10
12th	-				——	—	_		-		*
13th				——	——					<u> </u>	·
4th											en e
5th	_	_	-	——	——	—	—				
6th	_		_						_		
7th											
											
8th	—					·—	_		_	<u></u>	
9th	_	_	<u></u>			_				_	
Oth											
	_	—				_					· · · · · · · · · · · · · · · · · · ·
1st	_						_				
2nd	_	_			<u></u>	_	_				
	-										
4th	_		_				_				
5th											_

OCCUPANT INJURY CLASSIFICATION

Body Region

- Head
- Face
- (2) (3) Neck
- (4)Thorax
- (5) (6) Abdomen
- Spine
- **Upper Extremity**
- Lower Extremity
- Unspecified

Type of Anatomic Structure

- Whole Area
- (2) (3) Vessels
- Nerves
- Organs (includes Muscles/ligaments)
- Skeletal (includes (5)joints)
- Head LOC
- (9) Skin

Specific Anatomic Structure

Vessels, Nerves, Organs. Bones, Joints are assigned consecutive two digit numbers beginning with 02.

The exceptions to this rule apply to:

Whole Area

- Skin Abrasion (02)
- Skin Contusion (04)
- (06)Skin - Laceration
- Skin Avulsion (08)
- Amputation (10)
- (20)Burn
- Crush (30)
- Degloving (40)
- Injury NFS (50)
- Trauma, other than (90)mechanical

Head - LOC

- (02) Length of LOC
- (04)Level
- (06) of
- Consciousness (08)
- (10) Concussion

Spine

- Cervical (02)
- (04)**Thoracic**
- (06) Lumbar

Level of Injury

Specific injuries are assigned consecutive two-digit numbers beginning with 02.

To the extent possible, within the organizational framework of the AIS, 00 is assigned to an injury NFS as to severity or where only one injury is given in the dictionary for that anatomic structure. 99 is assigned to any injury NFS as to lesion or severity.

Abbreviated Injury Scale

- Minor Injury
- (2) (3) Moderate Injury
- Serious Injury
- (4) (5) Severe Injury
- Critical Injury
- Maximum (untreatable)
- injured, unknown severity

Aspect

- Right
- Left
- (2) (3) Bilateral
- (4) (5) Central
- Anterior
- (6) Posterior
- Superior
- (8) Inferior Unknown (9)

 - Whole region

SOURCE OF INJURY DATA

OFFICIAL RECORDS

- (1) Autopsy records with or without hospital/medical records
- (2) Hospital/medical records other than emergency room (e.g., discharge summary)
- (3) Emergency room records only (including associated X-rays or other lab reports)
- (4) Private physician, walk-in or emergency clinic

UNOFFICIAL RECORDS

- (5) Lay coroner report
- (6) E.M.S. personnel
- (7) Interviewee
- (8) Other source (specify):
- (9) Police

INJURY SOURCE

CONFIDENCE LEVEL

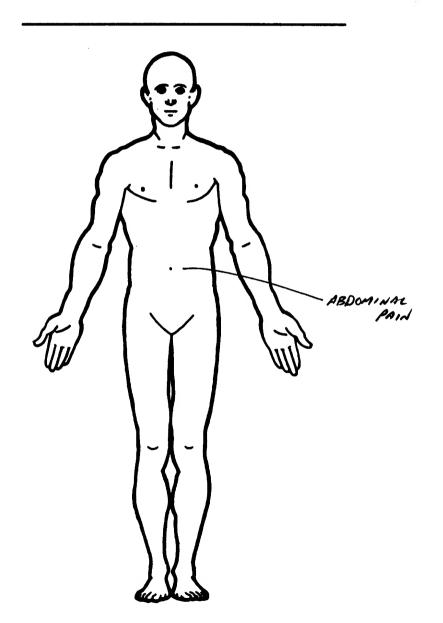
- (1) Certain
- (2) Probable
- Possible
- (9) Unknown

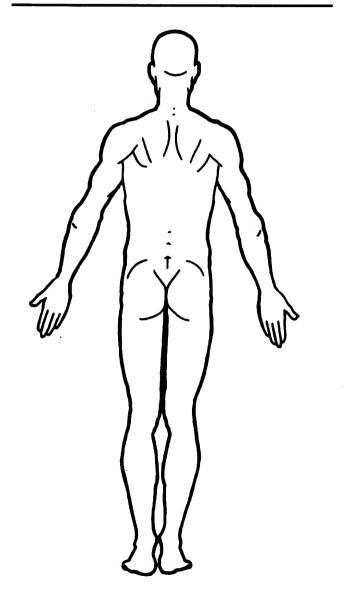
DIRECT/INDIRECT INJURY

- Direct contact injury
- (2) Indirect contact injury (3) Noncontact injury
- Injured, unknown source

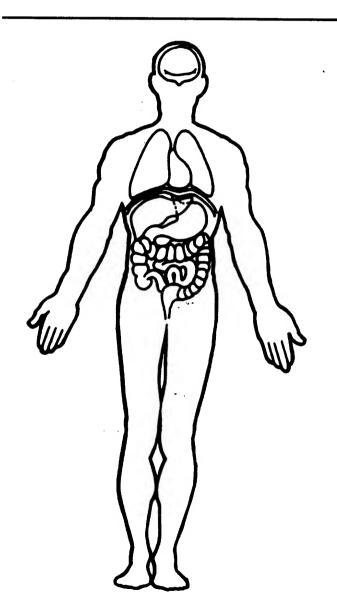
INJURY SOURCES FRONT (102) Right side hardware or (183) Air bag-passenger side and (411) Wall mounted head rest (used (001) Windshield armrest object held behind wheel chair) (002) Mirror (103) Right A (A1/A2)-pillar (184) Air bag-passenger side and (412) Other adaptive device (003) Sunvisor (104) Right B-pillar object in mouth (specify):_ (004) Steering wheel rim (105) Other right pillar (specify): (185) Air bag compartment (005)Steering wheel hub/spoke cover-passenger side (006)Steering wheel (combination (106)Right side window glass (186) EXTERIOR of OCCUPANT'S Air bag compartment of codes 004 and 005) (107)Right side window frame cover-passenger side and VEHICLE (007)Steering column, transmission (108)Right side window sill (451) Hood selector lever, other (109)Right side window glass Air bag compartment (452) Outside hardware (e.g., attachment including one or more of the cover-passenger side and outside mirror, antenna) (008) Cellular telephone or CB radio following: frame, window sill, jewelry Other exterior surface or tires (009) Add on equipment (e.g., tape A (A1/A2)-pillar, B-pillar, or (188) Air bag compartment (specify): deck, air conditioner) roof side rail. cover-passenger side and (010) Left instrument panel and (110) Other right side object object held (454) Unknown exterior objects (specify): Air bag compartment (011) Center instrument panel and EXTERIOR OF OTHER MOTOR cover-passenger side and below object in mouth VEHICLE (012) Right instrument panel and INTERIOR (190)Other air bag (specify) (501) Front bumper below (151) Seat, back support (502) Hood edge (013) Glove compartment door (152) Belt restraint webbing/buckle (195) Other air bag compartment (503) Other front of vehicle (014) Knee bolster (153) Belt restraint B-pillar or door cover (specify) (specify): (015) Windshield including one or frame attachment point more of the following: front (154) Other restraint system (504) Hood header, A (A1/A2)-pillar, component (specify): ROOF (505)Hood ornament instrument panel, mirror, or Windshield, roof rail, A-pillar (201) Front header (506)steering assembly (driver side (155) Head restraint system (202)Rear header (507)Side surface only) (160) Other occupants (specify): (203)Roof left side rail (508)Side mirrors (016) Windshield including one or (204)Roof right side rail (509)Other side protrusions more of the following: front Interior loose objects (205)Roof or convertible top (specify): header, A (A1/A2)-pillar, (162) Child safety seat (specify): instrument panel, or mirror FLOOR (510) Rear surface (passenger side only) (163) Other interior object (specify): (251) Floor (including toe pan) (511) Undercarriage (017) Windshield reinforced by (252) Floor or console mounted (512) Tires and wheels exterior object (specify) transmission lever, including (513) Other exterior of other motor AIR BAG console vehicle (specify): _ (019) Other front object (specify): (170) Air bag-driver side (253)Parking brake handle Air bag-driver side and (254)Foot controls including (514) Unknown exterior of other eyeweai parking brake motor vehicle LEFT SIDE (172) Air bag-driver side and jewelry (051) Left side interior surface, OTHER VEHICLE OR OBJECT IN (173) Air bag-driver side and object REAR excluding hardware or held (301) Backlight (rear window) THE ENVIRONMENT armrests (174) Air bag-driver side and object (302)Backlight storage rack, (551) Ground (052) Left side hardware or armrest (598) Other vehicle or object in mouth door, etc. (053) Left A (A1/A2)-pillar (175) Air bag compartment (303) Other rear object (specify): (specify): (054) Left B-pillar cover-driver side (055)Other left pillar (specify): (176) Air bag compartment (599) Unknown vehicle or object ADAPTIVE (ASSISTIVE) DRIVING cover-driver side and eyewear (056) Left side window glass **EQUIPMENT** (177) Air bag compartment NONCONTACT INJURY (057) Left side window frame cover-driver side and jewelry (401) Hand controls for (601) Fire in vehicle (058) Left side window sill (602) Flying glass (178) Air bag compartment braking/acceleration (059) Left side window glass cover-driver side and object Steering control devices (603) Other noncontact injury including one or more of the held (attached to OEM steering source following: frame, window sill. (179) Air bag compartment wheel) (specify): A (A1/A2)-pillar, B-pillar, or cover-driver side and object in (403)Steering knob attached to (604) Air bag exhaust gases roof side rail. mouth steering wheel (697) Injured, unknown source (060) Other left side object (180) Air bag-passenger side (405) Replacement steering wheel (specify): (181) Air bag-passenger side and (i.e., reduced diameter) (406) evewear Joy stick steering controls (182) Air bag-passenger side and (407) Wheelchair tie-downs RIGHT SIDE jewelry (408) Modification to seat belts, (101) Right side interior surface, (specify):_ excluding hardware or Additional or relocated armrests switches, (specify): (410) Raised roof

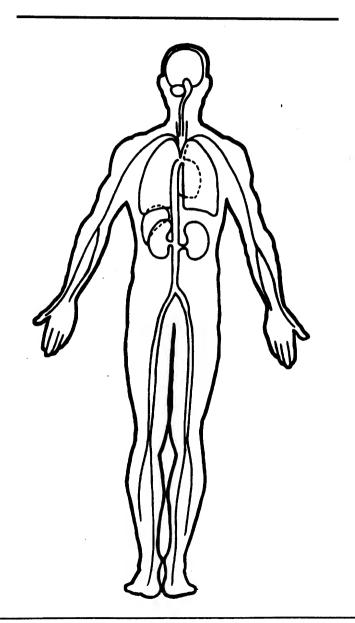
OFFICIAL INJURY DATA — SOFT TISSUE INJURIES





	OFFICIAL INJURY DATA — SKELETAL INJURIES	
3	ndicate the Location, Specific Anatomic Structure, Detail (size, depth, fracture type, head injury clinical signs and neurological deficits), and ource of all injuries indicated by official sources (or from PAR or other unofficial sources if medical records and interviewee data are navailable.)	
Blood Alcohol Level (mg/dl) BAL =	bod)	
Glasgow Coma Scale Score GCSS =	- Musculoskeme INJUEIES -	
Units of Blood Given Units =		
Arterial Blood Gase pH = PO ₂ = PCO ₂		
нсо,		





National Accident Sampling System-Crashworthiness Data System: Occupant Injury Form

OCCUPANT INJURY DATA SUPPLEMENT											
	Source of Injury Data	Body Region	Type of Anatomic Structure	A.I.S Specific Anatomic Structure	90 Level of	A.I.S. Severity		Injury	Injury Source Confidence Level	Direct/ Indirect	Occupant Area Intrusion
	Dala	Region	Structure	Structure	Injury	Severity	Aspect	Source	Levei	Injury	Number
		_					_		_		
	-	_	_				_	· — —		********	******
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							_				
		_					_				
		_				_	_		_	_	
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National Highway Traffic Safety Administration	NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM
Primary Sampling Unit Number	OCCUPANT'S SEATING
2. Case Number - Stratum AB 17	10. Occupant's Seat Position 3 4
3. Vehicle Number	Front Seat (11) Left side
4. Occupant Number 4 6	(12) Middle (13) Right side
OCCUPANT'S CHARACTERISTICS	(14) Other (specify): (15) On or in the lap of another occupant
5. Occupant's Age Code actual age at time of accident. (00) Less than one year old (specify by month): (97) 97 years and older (99) Unknown 6. Occupant's Sex (1) Male	Second Seat (21) Left side (22) Middle (23) Right side (24) Other (specify): (25) On or in the lap of another occupant Third Seat (31) Left side
(2) Female-not reported pregnant (3) Female-pregnant-1st trimester(1st-3rd month) (4) Female-pregnant-2nd trimester(4th-6th month) (5) Female-pregnant-3rd trimester(7th-9th month) (6) Female-pregnant-term unknown (9) Unknown	(32) Middle (33) Right side (34) Other (specify): (35) On or in the lap of another occupant Fourth Seat (41) Left side (42) Middle (43) Right side
7. Occupant's Height 9 _ 9 _ 9 _ Code actual height to the nearest centimeter. (999) Unknown inches X 2.54 = centimeters	(44) Other (specify): リルスロのは SIDE (45) On or in the lap of another occupant (97) In or on unenclosed area (98) Other seat (specify): (99) Unknown
8. Occupant's Weight Code actual weight to the nearest kilogram. (999) Unknown pounds X .4536 =kilograms 9. Occupant's Role (1) Driver (2) Passenger (9) Unknown	11. Occupant's Posture (0) Normal posture Abnormal posture (1) Kneeling or standing on seat (2) Lying on or across seat (3) Kneeling, standing or sitting in front of seat (4) Sitting sideways or turned to talk with another occupant or to look out a rear window (5) Sitting on a console (6) Lying back in a reclined seat position (7) Bracing with feet or hands on a surface in front of seat (8) Other abnormal posture (specify): (9) Unknown

National Accident Camping Cystem-Orasiworthines	
EJECTIO	ON/ENTRAPMENT
12. Ejection (0) No ejection (1) Complete ejection (2) Partial ejection (3) Ejection, unknown degree (9) Unknown	15. Medium Status (Immediately Prior To Impact) (0) No ejection (1) Open (2) Closed (3) Integral structure (9) Unknown
13. Ejection Area (0) No ejection (1) Windshield (2) Left front (3) Right front (4) Left rear (5) Right rear (6) Rear (7) Roof (8) Other area (e.g., back of pickup, etc.) (specify): (9) Unknown	16. Entrapment (0) Not entrapped/exit not inhibited (1) Entrapped/pinned - mechanically restrained (2) Could not exit vehicle due to jammed doors, fire, etc. (specify): (9) Unknown 17. Occupant Mobility (0) Occupant fatal before removed from vehicle (1) Removed from vehicle while unconscious or
14. Ejection Medium (0) No ejection (1) Door/hatch/tailgate (2) Nonfixed roof structure (3) Fixed glazing (4) Nonfixed glazing (specify): (5) Integral structure (8) Other medium (specify): (9) Unknown	disoriented (2) Removed from vehicle due to injuries (3) Exited vehicle with some assistance (4) Exited vehicle under own power (5) Occupant fully ejected (9) Unknown

		BELT S	SYSTE	MF	UNCTION
18.	Man (0) (1) (2) (3) (4) (5)	ual (Active) Belt System Availability None available Belt removed/destroyed Shoulder belt Lap belt Lap and shoulder belt Belt available—type unknown	4	22.	Shoulder Belt Upper Anchorage Adjustment (0) No shoulder belt (1) No upper anchorage adjustment for shoulder belt Adjustable shoulder Belt Upper Anchorage (2) In full up position (3) In mid position
	(6) (7)	gral Belt Partially Destroyed Shoulder belt (lap belt destroyed/removed) Lap belt (shoulder belt destroyed/removed) Other belt (specify):		23	 (4) In full down position (5) Position unknown (9) Unknown if position has adjustable upper anchorage adjustment Automatic (Passive) Belt System Availability/
	(9)	Unknown	-	20.	(0) Not equipped/not available
19.	(00)	ual (Active) Belt System Use None used, not available, or belt removed/destroyed Inoperative (specify):	5		 (1) 2 point automatic belts (2) 3 point automatic belts (3) Automatic belts - type unknown
	(02) (03) (04)	Shoulder belt Lap belt Lap and shoulder belt		24	Non-functional (4) Automatic belts destroyed or rendered inoperative (9) Unknown
	(05) (08)	Belt used—type unknown Other belt used (specify):	•	∠4.	Automatic (Passive) Belt System Use (0) Not equipped/not available/destroyed or rendered inoperative
	(13)	Shoulder belt used with child safety seat Lap belt used with child safety seat Lap and shoulder belt used with child safety seat			 (1) Automatic belt in use (2) Automatic belt not in use (manually disconnected, motorized track inoperative) (specify): (3) Automatic belt use unknown
	(15) (18)	Belt used with child safety seat—type unknown Other belt used with child safety seat	νn	05	(9) Unknown
	(99)	(specify): Unknown if belt used	4	25.	Automatic (Passive) Belt System Type (0) Not equipped/not available (1) Non-motorized system
20.	(0)	er Use of Manual (Active) Belts None used or not available	<u>9</u>		(2) Motorized system (9) Unknown
	(2)	Belt used properly Belt used properly with child safety seat		26.	Proper Use of Automatic (Passive) Belt System (0) Not agree the system of the system
	(3) { (4) }	Used Improperly Shoulder belt worn under arm Shoulder belt worn behind back or seat Belt worn around more than one person			 (0) Not equipped/not available/not used (1) Automatic belt used properly (2) Automatic belt used properly with child safety seat
	(6) l	Lap belt worn on abdomen Lap belt or lap and shoulder belt used mproperly with child safety seat (specify):			Automatic Belt Used Improperly (3) Automatic shoulder belt worn under arm (4) Automatic shoulder belt worn behind back (5) Automatic belt worn around more than
		Other improper use of manual belt system (specify):			one person (6) Lap portion of automatic belt worn on abdomen
	(9) Ī	Jnknown	,		(7) Automatic lap and shoulder belt or automatic shoulder belt used improperly
	Durin	ıal (Active) Belt Failure Modes ıg Accident			with child safety seat (specify):
	(1) <u>1</u> (2)	No manual belt used or not available No manual belt failure(s) Forn webbing (stretched webbing not ncluded)			(8) Other improper use of automatic belt system (specify):(9) Unknown
	(3) E (4) U	Broken buckle or latchplate Jpper anchorage separated Other anchorage separated (specify):		27.	Automatic (Passive) Belt Failure Modes During Accident (0) Not equipped/not available/not in use
	(7) (Broken retractor Combination of above (specify):			 (1) No automatic belt failure(s) (2) Torn webbing (stretched webbing not included) (3) Broken buckle or latchplate (4) Upper anchorage separated
	_	Other manual belt failure (specify):			(5) Other anchorage separated (specify):(6) Broken retractor
	(9) L	Jnknown			(7) Combination of above (specify): (8) Other automatic belt failure (specify):
					(9) Unknown

POLICE REPORTED RESTRAINT USE	AIR BAG SYSTEM FUNCTION
28. Police Reported Belt Use (0) None used (1) Police did not indicate belt use (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt used, type not specified (6) Child safety seat (7) Automatic belt (8) Other type belt, (specify):	30. Frontal Air Bag System Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag Non-functional (2) Air bag disconnected (specify): (3) Air bag not reinstalled (9) Unknown
(9) Police indicated "unknown" 29. Police Reported Air Bag Availability/Function (0) No air bag available (1) Police did not indicate air bag availability/function (2) Deployed (3) Not deployed (4) Unknown if deployed (9) Police indicated "unknown"	 31. Frontal Air Bag System Deployment (This Occupant Position) (0) Not equipped/not available (1) Deployed during accident (as a result of impact) (2) Deployed inadvertently just prior to accident (3) Deployed, details unknown (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (5) Unknown if deployed (7) Nondeployed (9) Unknown
Check the Primary Source Used In Determining Belt Use. [] Not equipped/not available/destroyed or rendered inoperative [] Vehicle inspection [] Official injury data [] Driver/occupant interview [/ Other (specify):	32. Other Than First Seat Frontal Air Bag Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag Non-functional (2) Air bag disconnected (specify): (3) Air bag not reinstalled (9) Unknown Specify type of "other" air bag present: 33. Air Bag(s) Deployment, Other Than First
	Seat Frontal (This Occupant Position) (0) Not equipped with an "other" air bag (1) Deployed during accident (as a result of impact) (2) Deployed inadvertently just prior to accident (3) Deployed, details unknown (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (5) Unknown if deployed (7) Nondeployed (9) Unknown 34. Are There Indications of Air Bag System Failure? (This Occupant Position) (0) Not equipped/not available (1) No (2) Yes (specify):
	(9) Unknown

FIRST SEAT FRONTAL AIR	BAG SYSTEM EVALUATION
 35. Had Vehicle Been in Previous Accident(s)? Φ (0) Not equipped/not available (1) No previous accidents Yes (2) Previous accident(s) without deployment(s) (3) One previous accident with deployment (4) More than one previous accident with at least one deployment (8) Previous accidents, unknown deployment status (9) Unknown 	 40. Longitudinal Component of Delta V For Air Bag Deployment Impact (-000) Not equipped/not available Code the value of the delta V for the impact that initiated the air bag deployment (-996) Deployment, unknown longitudinal Delta V (-997) Not deployed (-998) Unknown if deployed (-999) Unknown
36. Type of Air Bag (0) Not equipped/not available (1) Original manufacturer installed system (2) Retrofitted air bag (3) Replacement air bag (8) Unknown type of air bag (9) Unknown	 41. Did Air Bag Module Cover Flap(s) Open At Designated Tear Points? (0) Not equipped/not available (1) No (2) Yes (3) Deployed, unknown if flap(s) opened at designated tear points (7) Not deployed (8) Unknown if deployed (9) Unknown
37. Had Any Prior Maintenance/Service Been Performed On This Air Bag System? (0) Not equipped/not available (1) No prior maintenance (2) Yes, prior maintenance (specify): (9) Unknown	 42. Were Air Bag Module Cover Flap(s) Damaged? φ (0) Not equipped/not available (1) No (2) Yes (specify): (3) Deployed, unknown if air bag module cover flap(s) damaged (7) Not deployed
38. Air Bag Deployment Accident Event Sequence Number (00) Not equipped/not available Code the accident event sequence number that initiated the air bag deployment (96) Deployed, unknown event (97) Not deployed (98) Unknown if deployed (99) Unknown	(8) Unknown if deployed (9) Unknown 43. Was There Damage To The Air Bag? (00) Not equipped/not available (01) Not damaged Yes - Air Bag Damage (02) Ruptured (03) Cut (04) Torn
39. CDC For Air Bag Deployment Impact (0) Not equipped/not available (1) Highest delta V (2) Second highest delta V (3) Other non-coded delta V (specify): (6) Deployed, unknown event (7) Not deployed (8) Unknown if deployed (9) Unknown	(05) Holed (06) Burned (07) Abraded (88) Other damage (specify): (95) Damaged, details unknown (96) Deployed, unknown if damaged (97) Not deployed (98) Unknown if deployed (99) Unknown

	FIRST SEAT FRONTAL AIR BAG SYSTEM EVALUATION continued	HEAD RESTRAINT AND SEAT EVALUATION
44.	Source of Air Bag Damage (00) Not equipped/not available (01) Not damaged (02) Object worn by occupant, (specify): (03) Object carried by occupant, (specify): (04) Adaptive/assistive controls, (specify): (05) Fire in vehicle (06) Thermal burns (07) Rescue or emergency efforts (88) Other damage source (specify):	49. Head Restraint Type/Damage by Occupant at This Occupant Position (0) No head restraints (1) Integral—no damage (2) Integral—damaged during accident (3) Adjustable—no damage (4) Adjustable—damaged during accident (5) Add-on—no damage (6) Add-on—damaged during accident (8) Other (specify): (9) Unknown 50. Seat Type (this Occupant Position) (00) Occupant not seated or no seat
45.	(95) Damaged, unknown source (96) Deployed, unknown if damaged (97) Not deployed (98) Unknown if deployed (99) Unknown Was The Air Bag Tethered? (0) Not equipped/not available (1) No (2) Yes (specify number of tether straps):	(01) Bucket (02) Bucket with folding back (03) Bench (04) Bench with separate back cushions (05) Bench with folding back(s) (06) Split bench with separate back cushions (07) Split bench with folding back(s) (08) Pedestal (i.e., column supported) (09) Box mounted seat (i.e., van type) (10) Other seat type (specify):
46.	(3) Deployed, unknown if tethered (7) Not deployed (8) Unknown if deployed (9) Unknown Did The Air Bag Have Vent Ports? (0) Not equipped/not available (1) No (2) Yes (specify number of vent ports):	(99) Unknown 51. Seat Orientation (this Occupant Position) (0) Occupant not seated or no seat (1) Forward facing seat (2) Rear facing seat (3) Side facing seat (inward) (4) Side facing seat (outward) (8) Other (specify):
47.	(3) Deployed, unknown if vent ports present (7) Not deployed (8) Unknown if deployed (9) Unknown Was the Air Bag in this Occupant's Position Contacted by Another Occupant? (0) Not equipped/not available (1) No (2) Yes (specify):	(9) Unknown 52. Seat Track Adjusted Position Prior To Impact (0) Occupant not seated or no seat (1) Non-adjustable seat track Adjustable Seat Track (2) Seat at forward most track position (3) Seat between forward most and middle track positions
48.	(3) Deployed, unknown if other occupant contact to air bag (7) Not deployed (8) Unknown if deployed (9) Unknown Was This Occupant Wearing Eye-wear? (0) Not equipped/not available (1) No (2) Eyeglasses/sunglasses (3) Contact lenses	 (4) Seat at middle track position (5) Seat between middle and rear most track positions (6) Seat at rear most track position (9) Unknown
	 (4) Deployed, unknown if eyewear worn (7) Not deployed (8) Unknown if deployed (9) Unknown 	

HEAD RESTRAINT AND SEAT EVALUATION continued

- 53. Seat Back Incline Prior and Post Impact
 - (00) Occupant not seated or no seat
 - (01) Not adjustable

Upright prior to impact

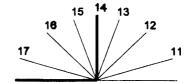
- (11) Moved to completely rearward position
- (12) Moved to rearward midrange position
- (13) Moved to slightly rearward position
- (14) Retained pre-impact position
- (15) Moved to slightly forward position
- (16) Moved to forward midrange position
- (17) Moved to completely forward position

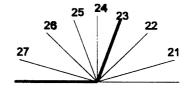
Slightly reclined prior to impact

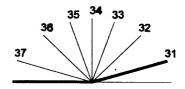
- (21) Moved to completely rearward position
- (22) Moved to rearward midrange position
- (23) Retained pre-impact position
- (24) Moved to upright position
- (25) Moved to slightly forward position
- (26) Moved to forward midrange position
- (27) Moved to completely forward position

Completely reclined prior to impact

- (31) Retained pre-impact position
- (32) Moved to rearward midrange position
- (33) Moved to slightly rearward position
- (34) Moved to upright position
- (35) Moved to slightly forward position
- (36) Moved to forward midrange position
- (37) Moved to completely forward position
- (99) Unknown
- 54. Seat Performance (this Occupant Position)
- 8
- (0) Occupant not seated or no seat
- (1) No seat performance failure(s)
- (2) Seat adjusters failed
- (3) Seat back folding locks or "seat back" failed (specify):_____
- (4) Seat track/anchors failed
- (5) Deformed by impact of occupant
- (6) Deformed by passenger compartment intrusion, (specify):
- (7) Combination of above (specify):
- (8) Other (specify): DEFORMED BY CALGO
- (9) Unknown







CH	HILD SAF	ETY SEAT
(000) No child safety seat Applicable codes are found in your NASS CD	<u>4</u> <u>4</u>	58. Child Safety Seat Harness Usage <u>\$\phi\$\$ \phi\$\$\$ \phi\$\$\$\$\$\$</u>
Data Collection, Coding and Editing (950) Built-in child safety seat (997) Other make/model (specify):		59. Child Safety Seat Shield Usage
(998) Unknown make/model (999) Unknown if child safety seat used		Note: Options below applicable to Variables OA58-OA60.
56. Type of Child Safety Seat (0) No child safety seat (1) Infant seat	4	(00) No child safety seat Not Designed With Harness/Shield/Tether
(2) Toddler seat(3) Convertible seat(4) Booster seat - with shield		(01) After market harness/shield/tether added, not used (02) After market harness/shield/tether used
(5) Booster seat - without shield(7) Other type child safety seat (specify):		(03) Child safety seat used, but no after market harness/shield/tether added (09) Unknown if harness/shield/tether
(8) Unknown child safety seat type (9) Unknown if child safety seat used		added or used Designed With Harness/Shield/Tether
57. Child Safety Seat Orientation	φ 4	(11) Harness/shield/tether not used (12) Harness/shield/tether used (19) Unknown if harness/shield/tether used
Designed for Rear Facing for This Age/Weigh (01) Rear facing (02) Forward facing	nt	Unknown If Designed With Harness/Shield/Tether (21) Harness/shield/tether not used (22) Harness/shield/tether used
(08) Other orientation (specify): (09) Unknown orientation	_	(29) Unknown if harness/shield/tether used (99) Unknown if child safety seat used
Designed For Forward Facing for This Age/W (11) Rear facing (12) Forward facing (18) Other orientation (specify):	/eight	
(19) Unknown orientation	_	
Unknown Design or Orientation For This Age/Weight, or Unknown Age/Weight (21) Rear facing		
(22) Forward facing (28) Other orientation (specify):		
(29) Unknown orientation		
(99) Unknown if child safety seat used		

INJURY CONSEQUENCES			
 (0) O - No injury (1) C - Possible injury (2) B - Nonincapacitating injury (3) A - Incapacitating injury (4) K - Killed (5) U - Injury, severity unknown (6) Died prior to accident (9) Unknown 	2	63. Type Of Medical Facility (for Initial Treatment) (0) Not treated at a medical facility (1) Trauma center (2) Hospital (3) Medical clinic (4) Physician's office (5) Treatment later at medical facility (8) Other (specify):	- 9
62. Treatment - Mortality (0) No treatment (1) Fatal (2) Fatal - ruled disease (specify):	9_	64. Hospital Stay (00) Not Hospitalized Code the number of days (up through 60) that the occupant stayed in hospital. (61) 61 days or more	9
Nonfatal (3) Hospitalization (4) Transported and released (5) Treatment at scene - nontransported (6) Treatment later (7) Treatment - other (specify): (8) Transported to a medical facility-unknown if treated (9) Unknown		(99) Unknown 65. Working Days Lost Code the number of days (up through 60) that the occupant lost from work due to the accident (00) No working days lost (61) 61 days or more (62) Fatally injured (97) Not working prior to accident (99) Unknown	9

STOP WORK HERE

VARIABLES 66-74

TO BE CODED BY THE ZONE CENTER

TO BE CODED BY THE ZONE CENTER

	INJURY CONSEQUENCES		TRAUMA DATA
66	Time to DeathCode number of hours from time of accident to time of death up through 24 hours. If time of death is greater than 24 hours, code number of days. (Note: 1 day = 31, 2 days = 32, n days = 30 +n up through 30 days = 60) (00) Not fatal (96) Fatal - ruled disease (99) Unknown	<u> </u>	71. Glasgow Coma Scale (GCS) Score (at Medical Facility) (00) Not injured (01) Injured - not treated at medical facility (02) No GCS Score at medical facility (03-15) Code the actual value of the initial GCS Score recorded at medical facility. (97) Injured, details unknown (99) Unknown if injured
	1st Medically Reported Cause of Death	4 4	72. Was the Occupant Given Blood? (1) No - blood not given (2) Yes - blood given
69. 70.	2nd Medically Reported Cause of Death 3rd Medically Reported Cause of Death Code the Occupant Injury from line number(s) for the medically reported injury(s) which reportedly contributed to this occupant's death (00) Not fatal or no additional causes (96) Mode of death given but specific injuries are not linked to cause of death. (specify): (97) Other result (includes fatal ruled disease) (specify): (99) Unknown Number of Recorded Injuries for This Occupant Code the actual number of injuries recorded for this occupant. (00) No recorded injuries (97) Injured, details unknown (99) Unknown if injured	\$ \$\psi\$	(specify units):

BEST AVAILABLE

Form Approved O.M.B. No. 2127-0021

National Highway Traffic Safety Administration

OCCUPANT INJURY FORM

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number 3. Vehicle Number 4 / 2. Case Number - Stratum AB 17 4. Occupant Number 4 / 4

INJURY DATA

Record below the actual injuries sustained by this occupant that were identified from the official and unofficial data sources. Remember not to double count an injury just because it was identified from two different sources. If greater than ten injuries have been documented, encode the balance on the Occupant Injury Supplement.

		A.1.S 90								Injury		Occupar
	Source of Injury Data	Body Region	Type of Anatomic Structure	Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspec	at .	Injury Source	Source Confidence Level	Direct/ e Indirect Injury	Area Intrusion Numbe
1st	5. <u>7</u>	6. <u>8</u>	7. <u>9</u>	<u>. 5¢</u>	<u>9 9 9 </u>	107	11. <u>Z</u>	12	697	13. <u>9</u>	14.7	15. <u>4</u> 4
2nd	16	17	18 1	· :	20	21	22	23		24	25	26
3rd	27	28	29 30) :	31	32	33	34		35	36	37
4th	38	39	40 41	ı ·	4 2	43	44	45		46	47	48
5th	49	50	51 52	21	53	54	55	5 6		57	58	59
5th	60	61	62 65) I	54	65	66	67		68	69	70
7th	71	n	73 74	·	75	76	77	78		79	80	81
ith	82	83	84 8£		36	87	88	89		90	91	92
ith	93	94	95 96	· {	97	98	99	100		101	102	103
Oth	104	105 1	06 107	10)8	109	110	111		112	113	114

				OCC A.I.S 90	UPANT	INJURY	DATA				
	Source of Injury Data	Body Region	Type of Anatomic Structure	Specific Anatomic Structure	Level of Injury	A.I.S. Severity	Aspect	Injury Source	Injury Source Confidence Level	Direct/ Indirect Injury	Occupant Area Intrusion Number
11th	_		_	2000 	<u> </u>	_	_		_		
12th	_		_			—	_			_	1 m
13th	_	_	_	-		_	_			-	
14th		_	_			_	_		_		
15th		-				-			_	_	
16th	_					_	_		_	-	
17th	<u></u>								_	_	
18th	_	—			——		_			_	
19th	_	—	_			_	_		_	—	-
20th	-	_	_				-		<u>—</u>	-	
21 s t	-	_				_	-		_	_	
22nd	_					-	_		_	-	
23rd	_	Ŧ	-				_		-		
2 4th			_						* ************************************		*******
25th											

OCCUPANT INJURY CLASSIFICATION

Body Region Head

- Face
- (2) (3) (4) (5) Neck
- Thorax
- Abdomen (6)Spine
- (7) (8) **Upper Extremity**
- Lower Extremity
- (9) Unspecified

Type of Anatomic Structure

- Whole Area
- Vessels
- **Nerves**
- (2) (3) (4) Organs (includes Muscles/ligaments)
- (5) Skeletal (includes joints)
- Head LOC
- (9) Skin

Specific Anatomic Structure

Vessels, Nerves, Organs. Bones, Joints are assigned consecutive two digit numbers beginning with 02.

The exceptions to this rule apply to:

Whole Area

- (02) Skin Abrasion
- Skin Contusion (04)
- (06)Skin - Laceration
- (08) Skin - Avulsion
- (10)Amputation
- (20) Burn
- (30) Crush
- (40)Degloving
- Injury NFS (50)
- Trauma, other than (90)mechanical

Head - LOC

- (02) Length of LOC
- (04) Level
- (06)of
- Consciousness (08)
- (10) Concussion

Spine

- (02)Cervical
- (04) Thoracic
- (06)Lumbar

Level of Injury

Specific injuries are assigned consecutive two-digit numbers beginning with 02.

To the extent possible, within the organizational framework of the AIS, 00 is assigned to an injury NFS as (9) to severity or where only one (0) injury is given in the dictionary for that anatomic structure. 99 is assigned to any injury NFS as to lesion or severity.

Abbreviated Injury Scale

- Minor Injury
- Moderate Injury
- (2) (3) (4) (5) Serious Injury
- Severe Injury
- Critical Injury (6) Maximum
- (untreatable)
- Injured, unknown severity

Aspect

- Right
- Left (2)
- (3) Bilateral
- (4) (5) Central Anterior
- (6) **Posterior**
- (7) Superior
- (8) Inferior
 - Unknown
- - Whole region

SOURCE OF INJURY DATA

OFFICIAL RECORDS

- (1) Autopsy records with or without hospital/medical records
- (2) Hospital/medical records other than emergency room (e.g., discharge summary)
- (3) Emergency room records only (including associated X-rays or other lab reports)
- (4) Private physician, walk-in or emergency clinic

UNOFFICIAL RECORDS

- (5) Lay coroner report
- (6) E.M.S. personnel
- Interviewee
- (8) Other source (specify):
- (9) Police

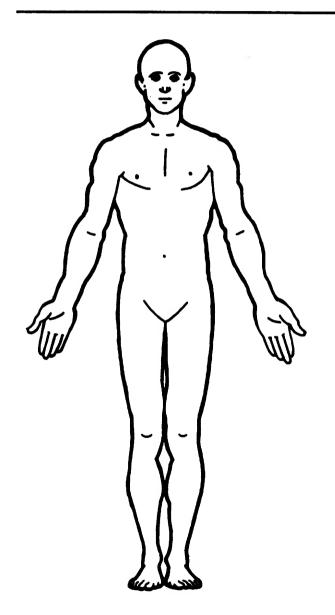
INJURY SOURCE CONFIDENCE LEVEL

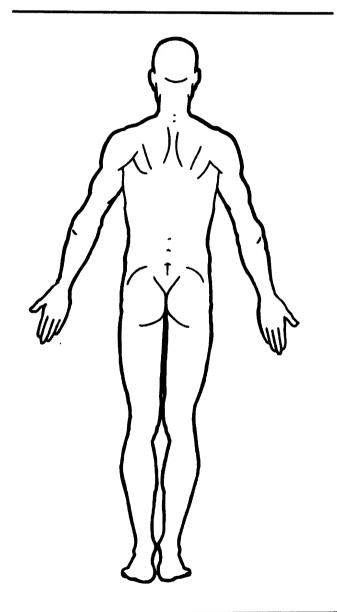
- (1) Certain (2) Probable
- (3) Possible
- (9) Unknown

DIRECT/INDIRECT INJURY

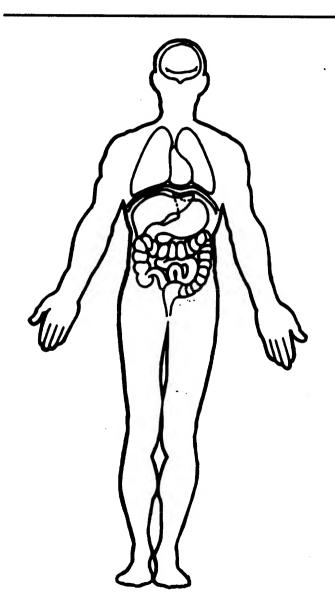
- Direct contact injury (2) Indirect contact injury
- (3) Noncontact injury
- Injured, unknown source

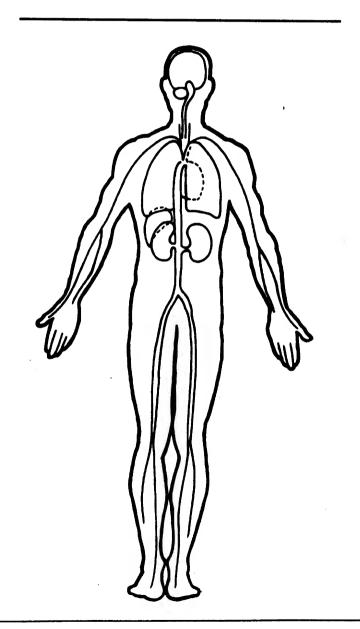
			INJURY	SOUR	RCES		100
FRON	т	(102)	Right side hardware or	(183)	Air bag-passenger side and	(411)	Wall mounted head rest (used
(001)	Windshield		armrest		object held		behind wheel chair)
(002)	Mirror	(103)	Right A (A1/A2)-pillar	(184)	Air bag-passenger side and	(412)	Other adaptive device
(003)	Sunvisor	(104)	Right B-pillar		object in mouth		(specify):
(004)	Steering wheel rim	(105)	Other right pillar (specify):	(185)	Air bag compartment		
(005)	Steering wheel hub/spoke			` ,	cover-passenger side		
(006)	Steering wheel (combination	(106)	Right side window glass	(186)	, -	EXTER	RIOR of OCCUPANT'S
` ′	of codes 004 and 005)	(107)	Right side window frame	(,	cover-passenger side and	VEHIC	
(007)	Steering column, transmission	(108)	Right side window sill		eyewear	(451)	
` ′	selector lever, other	(109)	Right side window glass	(187)	Air bag compartment	(452)	Outside hardware (e.g.,
	attachment	(,	including one or more of the	(,	cover-passenger side and	(102)	outside mirror, antenna)
(800)	Cellular telephone or CB radio		following: frame, window sill,		jewelry	(453)	Other exterior surface or tires
(009)	Add on equipment (e.g., tape		A (A1/A2)-pillar, B-pillar, or	(188)	Air bag compartment	(100)	(specify):
()	deck, air conditioner)		roof side rail.	(,	cover-passenger side and		(opoony).
(010)	Left instrument panel and	(110)	Other right side object		object held	(454)	Unknown outside abjects
0.0,	below	(110)	(specify):	(190)	•	(454)	Unknown exterior objects
(011)	Center instrument panel and		(specify).	(189)	• • • • • • • • • • • • • • • • • • • •	CVTC	DIOD OF OTHER MOTOR
011)	•	-			cover-passenger side and		RIOR OF OTHER MOTOR
(042)	below	MITEE	uon.	(400)	object in mouth	VEHIC	
(012)	Right instrument panel and	INTER		(190)	Other air bag (specify)	, ,	Front bumper
/n.a.	below Character and the second		Seat, back support			(502)	Hood edge
(013)	Glove compartment door	(152)	Belt restraint webbing/buckle	(195)	Other air bag compartment	(503)	Other front of vehicle
(014)	Knee bolster	(153)	Belt restraint B-pillar or door		cover (specify)		(specify):
(015)	Windshield including one or		frame attachment point				
	more of the following: front	(154)	Other restraint system			(504)	Hood
	header, A (A1/A2)-pillar,		component (specify):	ROOF	•	(505)	Hood ornament
	instrument panel, mirror, or			(201)	Front header	(506)	Windshield, roof rail, A-pillar
	steering assembly (driver side	(155)	Head restraint system	(202)	Rear header	(507)	Side surface
	only)	(160)	Other occupants (specify):	(203)	Roof left side rail	(508)	Side mirrors
016)	Windshield including one or	` '		(204)	Roof right side rail	(509)	Other side protrusions
,	more of the following: front	(161)	Interior loose objects	(205)	Roof or convertible top	(000)	(specify):
	header, A (A1/A2)-pillar,	(162)	Child safety seat (specify):	(200)	Noor or conventible top		(specify).
	instrument panel, or mirror	(102)	Ciliu salety seat (specify).	FLOO	B	(E40)	D
	· .	(162)	Other interior abiast (see sit)			(510)	
0470	(passenger side only)	(163)	Other interior object (specify):		Floor (including toe pan)	(511)	Undercarriage
(017)	Windshield reinforced by		···	(252)	Floor or console mounted	(512)	Tires and wheels
	exterior object (specify)				transmission lever, including	(513)	Other exterior of other motor
		AIR BA	AG .		console		vehicle (specify):
019)	Other front object (specify):	(170)	Air bag-driver side	(253)	Parking brake handle		
		(171)	Air bag-driver side and	(254)	Foot controls including	(514)	Unknown exterior of other
			eyewear		parking brake		motor vehicle
EFT S	SIDE	(172)	Air bag-driver side and jewelry				
051)	Left side interior surface,	(173)	Air bag-driver side and object	REAR		OTHE	R VEHICLE OR OBJECT IN
	excluding hardware or		held	(301)	Backlight (rear window)	THE E	NVIRONMENT
	armrests	(174)	Air bag-driver side and object	(302)	Backlight storage rack,	(551)	
052)	Left side hardware or armrest	(,	in mouth	(552)	door, etc.	(598)	Other vehicle or object
'	Left A (A1/A2)-pillar	(175)		(202)	• • • • • • • • • • • • • • • • • • • •	(330)	•
	Left B-pillar	(173)	Air bag compartment	(303)	Other rear object (specify):		(specify):
	•	/4 7m	cover-driver side				11.1.
055)	Other left pillar (specify):	(176)	Air bag compartment			(599)	Unknown vehicle or object
050	1 0 11 1 1		cover-driver side and eyewear		TIVE (ASSISTIVE) DRIVING		
	Left side window glass	(177)	Air bag compartment	EQUIP	MENT	NONC	CONTACT INJURY
	Left side window frame	4	cover-driver side and jewelry	(401)	Hand controls for	(601)	Fire in vehicle
058)	Left side window sill	(178)	Air bag compartment		braking/acceleration	(602)	Flying glass
059)	Left side window glass		cover-driver side and object	(402)	Steering control devices	(603)	Other noncontact injury
	including one or more of the		held	•	(attached to OEM steering	/	source
	following: frame, window sill,	(179)	Air bag compartment		wheel)		(specify):
	A (A1/A2)-pillar, B-pillar, or		cover-driver side and object in	(403)	Steering knob attached to	(604)	Air bag exhaust gases
	roof side rail.		mouth	/	steering wheel	(697)	Injured, unknown source
	Other left side object	(180)	Air bag-passenger side	(405)	Replacement steering wheel	(331)	mjarou, diikiioffii addice
	(specify):	(181)	= : =	(400)			
	(3,500,7).	(101)	Air bag-passenger side and	(400)	(i.e., reduced diameter)		
		/400	eyewear	(406)	Joy stick steering controls		
	0.05	(182)	Air bag-passenger side and	(407)	Wheelchair tie-downs		
RIGHT			jewelry	(408)	Modification to seat belts,		
101)	Right side interior surface,				(specify):		
	excluding hardware or			(409)	Additional or relocated		
	•						
	armrests				switches, (specify):		
	=				switches, (specify):		





	OFFICIAL INJURY DA	ATA — SKELETAL INJURIES
Restrained?		
	ndicate the Location, Specific Anatomic Structure, Detail (size, depth, fr ource of all injuries indicated by official sources (or from PAR or other (navailable.)	acture type, head injury clinical signs and neurological deficits), and unofficial sources if medical records and interviewee data are
Blood Alcohol Level (mg/dl)		
BAL =	600	
Glasgow Coma Scale Score		
GCSS =		
Units of Blood Given		
Units =		
Arterial Blood Gase		A SEE A
pH = PO ₂ =		
PCO ₂		
HCO,		
	(N(X))	





National	Highway	Traffic	Safety
Adminis	tration		

GENERAL VEHICLE FORM

NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

1. Primary Sampling Unit Number 2. Case Number - Stratum	12. Speed Limit (000) No statutory limit Code posted or statutory speed limit in kmph (999) Unknown 55 mph x 1.6093 = 489 kmph
4. Vehicle Model Year Code the last two digits of the model year (99) Unknown 5. Vehicle Make (specify): BUICK Applicable codes are found in your	13. Police Reported Alcohol Presence For Driver (0) No alcohol present (1) Yes alcohol present (7) Not reported (8) No driver present (9) Unknown
NASS Data Collection, Coding and Editing Manual. (99) Unknown 6. Vehicle Model (specify): LESABRE Applicable codes are found in your NASS Data Collection, Coding and Editing Manual. (999) Unknown	14. Alcohol Test Result For Driver Code actual value (decimal implied before first digit—0.xx) (95) Test refused (96) None given (97) AC test performed, results unknown (98) No driver present (99) Unknown Source: WHO FROM EL MASSED TO OFFICIAL
7. Body Type Note: Applicable codes may be found on the back of this page.	15. Police Reported Other Drug Presence For Driver (0) No other drug(s) present (1) Yes other drug(s) present
8. Vehicle Identification Number \[I \q A P \q G \q Y \q D \q	(7) Not reported (8) No driver present (9) Unknown 16. Other Drug Specimen Test Result For Driver (0) No specimen test given (1) Drug(s) not found in specimen (2) Drug(s) found in specimen, (specify): (3) Specimen test given, results unknown or not
(1) Taxi (2) Vehicle used as school bus (3) Vehicle used as other bus (4) Military (5) Police (6) Ambulance (7) Fire truck or car (8) Other (specify): (9) Unknown OFFICIAL RECORDS	obtained (8) No driver present (9) Unknown if specimen test given 17. Driver's Zip Code (00001) Driver not a resident of U.S. or territories Code actual 5-digit zip code (99998) No driver present (99999) Unknown
10. Police Reported Vehicle Disposition (0) Not towed due to vehicle damage (1) Towed due to vehicle damage (9) Unknown 11. Police Reported Travel Speed 9 9 Code to the nearest kmph (NOTE: 000 means less than 0.5 kmph) (160) 159.5 kmph and above (999) Unknownmph X 1.6093 =kmph	18. Driver's Race/Ethnic Origin (1) White (non-Hispanic) (2) Black (non-Hispanic) (3) White (Hispanic) (4) Black (Hispanic) (5) American Indian, Eskimo or Aleut (6) Asian or Pacific Islander (7) Other (specify): (8) No driver present (9) Unknown

CODES FOR BODY TYPE

CDS APPLICABLE VEHICLES

Automobiles

- (01) Convertible (excludes sun-roof, t-bar)
- (02) 2-door sedan, hardtop, coupe
- (03) 3-door/2-door hatchback
- (04) 4-door sedan, hardtop
- (05) 5-door/4-door hatchback
- (06) Station wagon (excluding van and truck based)
- (07) Hatchback, number of doors unknown
- (08) Other automobile type (specify):
- (09) Unknown automobile type

Automobile Derivatives

- (10) Auto based pickup (includes El Camino, Caballero, Ranchero, Brat, and Rabbit pickup)
- (11) Auto based panel (cargo station wagon, auto based ambulance/hearse)
- (12) Large limousine more than four side doors or stretched chassis
- (13) Three-wheel automobile or automobile derivative

Utility Vehicles (≤ 4,500 kgs GVWR)

- (14) Compact utility (Jeep CJ-2 CJ-7, Scrambler, Golden Eagle, Renegade, Laredo, Wrangler, Cherokee [84 and after], Dispatcher, Raider, Bronco II, Bronco [76 and before], Explorer, S-10 Blazer, Geo Tracker, Bravada, S-15 Jimmy, Thing, Pathfinder, Trooper, Trooper II, Rodeo, Amigo, Navajo, 4-Runner, Montero, Passport, Samurai, Sidekick, Rocky)
- (15) Large utility (includes Jeep Cherokee [83 and before], Ramcharger, Trailduster, Bronco-fullsize [78 and after], fullsize Blazer, fullsize Jimmy, Hummer, Landcruiser, Rover, Scout, Yukon)
- (16) Utility station wagon (Chevy Suburban, GMC Suburban, Travelall, Grand Wagoneer, includes suburban limousine)
- (19) Utility, unknown body type

Van Based Light Trucks (≤ 4,500 kgs GVWR)

- (20) Minivan (Town and Country, Caravan, Grand Caravan, Voyager, Grand Voyager, Mini-Ram, Vista, Aerostar, Windstar, Villager, Lumina APV, Trans Sport, Silhouette, Astro, Safari, Toyota Van, Toyota Minivan, Previa, Nissan Minivan, Quest, Mitsubishi Minivan, Expo Wagon, Vanagon/Camper.)
- (21) Large van (B150-B350, Sportsman, Royal, Maxiwagon, Ram, Tradesman, Voyager [83 and before], E150-E350, Econoline, Clubwagon, Chateau, G10-G30, Chevy Van, Beauville, Sport Van, G15-G35, Rally Van, Vandura.)
- (22) Step van or walk-in van (≤ 4,500 kgs GVWR)
- (23) Van based motorhome (≤ 4,500 kgs GVWR)
- (24) Van based school bus (≤ 4,500 kgs GVWR)
- (25) Van based other bus (≤ 4,500 kgs GVWR)
- (28) Other van type (Hi-Cube Van, Kary) (specify):
- (29) Unknown van type

- (30) Compact pickup (D50, Colt P/U, Ram 50, Dakota, Arrow Pickup [foreign], Ranger, Courier, S-10, T-10, LUV, S-15, T-15, Sonoma, Datsun/Nissan Pickup, P'up, Mazda Pickup, Toyota Pickup, Mitsubishi Pickup)
- (31) Large Pickup (Jeep Pickup, Comanche, Ram Pickup, D100-D350, W100-W350, F100-F350, C10-C35, K10-K35, R10-R35, V10-V35, Silverado, Sierra, R100-R500, T100)

- (32) Pickup with slide-in camper
- (33) Convertible pickup
- (39) Unknown pickup style light conventional truck type

Other Light Trucks (≤ 4,500 kgs GVWR)

- (40) Čab chassis based (includes rescue vehicles, light stake, dump, and tow truck)
- (41) Truck based panel
- (42) Light truck based motorhome (chassis mounted)
- (45) Other light conventional truck type
- (48) Unknown light truck type
- (49) Unknown light vehicle type (automobile, utility, van, or light truck)

OTHER VEHICLES

Buses (Excludes Van Based)

- (50) School bus (designed to carry students, not cross country or transit)
- (58) Other bus type (e.g., transit, intercity, bus based motorhome) (specify):
- (59) Unknown bus type

Medium/Heavy Trucks (> 4,500 kgs GVWR)

- (60) Step van (> 4,500 kgs GVWR)
- 61) Single unit straight truck (4,500 kgs < GVWR ≤ 8,850 kgs)
- (62) Single unit straight truck (8,850 kgs < GVWR ≤ 12,000 kgs)
- (63) Single unit straight truck (> 12,000 kgs GVWR)
- (64) Single unit straight truck, GVWR unknown
- (65) Medium/heavy truck based motorhome
- (67) Truck-tractor with no cargo trailer
- (68) Truck-tractor pulling one trailer
- (69) Truck-tractor pulling two or more trailers
- (70) Truck-tractor (unknown if pulling trailer)
- (78) Unknown medium/heavy truck type
- (79) Unknown truck type (light/medium/heavy)

Motored Cycles (Does Not Include All-Terrain Vehicles/Cycles)

- (80) Motorcycle
- (81) Moped (motorized bicycle)
- (82) Three-wheel motorcycle or moped
- (88) Other motored cycle (minibike, motorscooter) (specify):_____
- (89) Unknown motored cycle type

Other Vehicles

- (90) ATV (All-Terrain Vehicle) and ATC (All-Terrain Cycle)
- (91) Snowmobile
- (92) Farm equipment other than trucks
- (93) Construction equipment other than trucks
- (97) Other vehicle type
- (99) Unknown body type

	PRECRASH ENVIRONMENTAL DATA	25	Bandway Sysfan Condition	1
10			Roadway Surface Condition (1) Dry	<u> </u>
19.	Relation To Interchange Or Junction		(2) Wet	
	(0) Non-interchange area and non-junction (1) Interchange area related		(3) Snow or slush	
	(1) interchange area related	•	(4) Ice	
	Non-Interchange junctions		(5) Sand, dirt, or oil	43
	(2) Intersection related		(8) Other (specify):	
	(3) Driveway, alley access related		(9) Unknown	
	(4) Other junction (specify)			,
		26.	Light Conditions	1
	(5) Unknown type of junction		(1) Daylight	
	(9) Unknown		(2) Dark	
	(3) OTKHOWIT		(3) Dark, but lighted	
			(4) Dawn (5) Dusk	
20.	Trafficway Flow		(9) Unknown	
	(0) Not physically divided (two way traffic)		(3) Olikilowii	
	(1) Divided trafficway-median strip without positive			
	barrier	27.	Atmospheric Conditions	4
	(2) Divided trafficway-median strip with positive barrier		(0) No adverse atmospheric-related driving	
	(3) One way traffic		conditions	
	(9) Unknown		(1) Rain	
	2		(2) Sleet/hail	
	Number Of Travel Lanes		(3) Snow	
	(1) One		(4) Fog(5) Rain and fog	
	(2) Two		(6) Sleet and fog	
	(3) Three (4) Four		(7) Other (e.g., smog, smoke, blowing sand or	dust.
	(5) Five		etc.) (specify):	
	(6) Six		(9) Unknown	
	(7) Seven or more		T (5 - 1 - 1 - 1	.k
	(9) Unknown		Traffic Control Device	<u>4</u>
	,		(0) No traffic control(s)(1) Traffic control signal (not RR crossing)	
22.	Roadway Alignment		(1) Tranic control signal (not KK crossing)	
	(1) Straight		Regulatory	
	(2) Curve right		(2) Stop sign	
	(3) Curve left		(3) Yield sign	
	(9) Unknown		(4) School zone sign	
	,		(5) Other regulatory sign (specify):	
	Roadway Profile		(6) Worning sign (not DD associate)	
	(1) Level		(6) Warning sign (not RR crossing)(7) Unknown sign	
	(2) Uphill grade (>2%)		(8) Miscellaneous/other controls including RR	
	(3) Hill crest		controls (specify):	
	(4) Downhill grade (>2%) (5) Sag			
	(9) Unknown		(9) Unknown	
	(c) Cindiowii			
24	Boodway Surface Time			
	Roadway Surface Type		Traffic Control Device Functioning	<u> </u>
	(1) Concrete (2) Bituminous (asphalt)		(0) No traffic control device	
	(3) Brick or block	•	(1) Traffic control device not functioning (specify)	
	(4) Slag, gravel, or stone	•	(Specify)	
	(5) Dirt	•	(2) Traffic control device functioning properly	
((8) Other (specify):		(9) Unknown	
((9) Unknown			

	PRECRASH DRIVER RELATED DATA	This Vehicle Traveling
30.	Driver's Distraction/Inattention To Driving (Prior To Recognition Of Critical Event) (00) No driver present (01) Attentive or not distracted (02) Looked but did not see Distractions (03) By other occupant(s), (specify):	(10) Over the lane line on left side of travel lane (11) Over the lane line on right side of travel lane (12) Off the edge of the road on the left side (13) Off the edge of the road on the right side (14) End departure (15) Turning left at intersection (16) Turning right at intersection (17) Crossing over (passing through) intersection
	(04) By moving object in vehicle (specify):	(18) This vehicle decelerating (19) Unknown travel direction
	 (05) While talking or listening to cellular phone (specify location and type of phone): (06) While dialing cellular phone (specify location and 	Other Motor Vehicle In Lane (50) Other vehicle stopped (51) Traveling in same direction with lower steady
	type of phone): (07) While adjusting climate controls (08) While adjusting radio, cassette, CD (specify):	speed (52) Traveling in same direction while decelerating (53) Traveling in same direction with higher speed (54) Traveling in opposite direction
	(09) While using other device/object in vehicle (specify): (10) Sleepy or fell asleep	(55) In crossover (56) Backing (59) Unknown travel direction of other motor vehicle in lane
	 (11) Distracted by outside person, object, or event (specify): (12) Eating or drinking (13) Smoking related 	Other Motor Vehicle Encroaching Into Lane (60) From adjacent lane (same direction)—over left lane line (61) From adjacent lane (same direction)—over right
	(97) Distracted/inattentive, details unknown(98) Other, distraction (specify):	lane line (62) From opposite direction—over left lane line (63) From opposite direction—over right lane line (64) From parking lane
	Pre-Event Movement (Prior to Recognition of Critical Event) (00) No driver present (01) Going straight (02) Decelerating in traffic lane (03) Accelerating in traffic lane (04) Starting in traffic lane (05) Stopped in traffic lane (06) Passing or overtaking another vehicle (07) Disabled or parked in travel lane (08) Leaving a parking position (09) Entering a parking position (10) Turning right (11) Turning left (12) Making a U-turn (13) Backing up (other than for parking position) (14) Negotiating a curve (15) Changing lanes (16) Merging (17) Successful avoidance maneuver to a previous critical event (97) Other (specify):	 (65) From crossing street, turning into same direction (66) From crossing street, across path (67) From crossing street, turning into opposite direction (68) From crossing street, intended path not known (70) From driveway, turning into same direction (71) From driveway, across path (72) From driveway, turning into opposite direction (73) From driveway, intended path not known (74) From entrance to limited access highway (78) Encroachment by other vehicle—details unknown Pedestrian, Pedalcyclist, or Other Nonmotorist (80) Pedestrian in roadway (81) Pedestrian approaching roadway (82) Pedalcyclist or other nonmotorist in roadway (specify):
32.	Critical Precrash Event This Vehicle Loss of Control Due To: (01) Blow out or flat tire	(89) Animal—unknown location (90) Object in roadway (91) Object approaching roadway
	(02) Stalled engine (03) Disabling vehicle failure (e.g., wheel fell off) (specify):	(92) Object—unknown location (98) Other critical precrash event (specify):
	(04) Non-disabling vehicle problem (e.g., hood flew up) (specify): (05) Poor road conditions (puddle, pot hole, ice, etc.) (specify): (06) Traveling too fast for conditions (08) Other cause of control loss (specify):	(99) Unknown

(09) Unknown cause of control loss

33. Attempted Avoidance Maneuver (00) No driver present (01) No avoidance maneuver (02) Braking (no lockup) (03) Braking (lockup) (04) Braking (lockup unknown) (05) Releasing brakes (06) Steering left (07) Steering right (08) Braking and steering left (09) Braking and steering right (10) Accelerating (11) Accelerating and steering right (12) Accelerating and steering right (98) Other action (specify):	35. Pre-Impact Location (0) No driver present (1) Stayed in original travel lane (2) Stayed on roadway but left original travel lane (3) Stayed on roadway, not known if left original travel lane (4) Departed roadway (5) Remained off roadway (6) Returned to roadway (7) Entered roadway (9) Unknown
(99) Unknown 34. Pre-Impact Stability (0) No driver present (1) Tracking (2) Skidding longitudinally—rotation less than 30 degrees (3) Skidding laterally—clockwise rotation (4) Skidding laterally—counterclockwise rotation (7) Other vehicle loss-of-control (specify): (9) Precrash stability unknown	page) (00) No impact Code the number of the diagram that best describes the accident circumstance (98) Other accident type (specify): (99) Unknown

STOP HERE IF GV07 DOES NOT EQUAL 01 - 49

Mational Accident Gampling Cystem-Crashworthness Dat	
OCCUPANT RELATED	44. Vehicle Cargo Weight 9, 99 0
37. Driver Presence in Vehicle (0) Driver not present (1) Driver present (9) Unknown	Code weight to nearest 10 kilograms. (000) Less than 5 kilograms (450) 4,500 kilograms or more (999) Unknown
38. Number of Occupants This Vehicle (00-96) Code actual number of occupants for this vehicle	lbs X .4536 = kgs Source:
(97) 97 or more	ROLLOVER DATA
(99) Unknown 39. Number of Occupant Forms Submitted <u>Ψ / </u>	45. Rollover (00) No rollover (no overturning) φ φ
AIR BAG RELATED	Rollover (primarily about the longitudinal axis) (01-16) Code the number of quarter turns
40. Is this an AOPS Vehicle? Φ	(17) Rollover, 17 or more quarter turns (specify):
(0) No (includes unknown) (1) Yes - researcher determined (2) VIN determined air bag system	(98) Rollover–end-over-end (i.e., primarily about the lateral axis) (99) Rollover (overturn), details unknown
 (2) VIN determined air bag system (3) VIN determined automatic (passive) belts (4) VIN determined air bag and automatic (passive) 	46. Rollover Initiation Typeφ φ
belts	(00) No rollover (01) Trip-over
 41. Air Bag(s) Deployment, First Seat Frontal (0) Not equipped or not available (1) No air bags deployed 	(02) Flip-over (03) Turn-over (04) Climb-over
Single Air Bag Vehicle (2) Driver air bag deployed	(05) Fall-over (06) Bounce-over
 (2) Driver air bag deployed (3) Driver air bag, unknown if deployed Multiple Air Bag Vehicle 	(07) Collision with another vehicle (08) Other rollover initiation type specify):
 (4) Driver side only deployed (5) Passenger side only deployed (6) Driver and passenger side deployed 	(98) Rollover-end-over-end (99) Unknown rollover initiation type
deployed (8) Air bag(s) deployed, details unknown	47. Location of Rollover Initiation (0) No rollover (1) On roadway
(9) Unknown	(2) On shoulder—paved
42. Air Bag(s) Deployment, Other Than First Ψ Seat Frontal	(2) On shoulder—paved (3) On shoulder—unpaved (4) On roadside or divided trafficway median (8) Rollover–end-over-end (9) Unknown
 (0) Not equipped with an "other" air bag (1) Deployed during accident (as a result of impact) (2) Deployed inadvertently just prior to accident (3) Deployed, details unknown 	48. Rollover Initiation Object Contacted (Note: Applicable codes on back of page)
(4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical)	49. Location on Vehicle Where Initial Principal — — — — — — — — — — — — — — — — — — —
(5) Unknown if deployed (7) Nondeployed	(0) No rollover (1) Wheels/tires
(9) Unknown	(2) Side plane (3) End plane (4) Undercarriage
Specify type of "other" air bag present:	(4) Undercarriage (5) Other location on vehicle (specify):
	(6) Non-contact rollover forces (specify):
VEHICLE WEIGHT ITEMS	(8) Rollover-end-over-end (9) Unknown
43. Vehicle Curb Weight	50. Direction of Initial Roll (0) No rollover
10 kilograms. (045) Less than 450 kilograms	(1) Roll right - primarily about the longitudinal axis (2) Roll left - primarily about the longitudinal axis (8) Rollover–end-over-end
(610) 6,100 kilograms or more (999) Unknown 3.61_4lbs x .4536 =/, 63_9_ kgs	(9) Unknown roll direction
Source:	

CODES FOR ROLLOVER INITIATION OBJECT CONTACTED

(00) No rollover (01-30) — Vehicle Number	(57) (58)	Fence Wall
Noncollision	(59) . (60)	Building Ditch or culvert
(31) Turn-over — fall-over	(61)	
(32) No rollover impact initiation (end-ov	rer-end) (62)	
(34) Jackknife	(63)	Curb
(OT) Cacidinio)6 <u>4</u> (Bridge
Collision With Fixed Object	(68)	
(41) Tree (≤ 10 cm in diameter)	(66)	Other fixed object (specify):
(42) Troe (\$ 10 cm in diameter)	(60)	
(42) Tree (> 10 cm in diameter)	(69)	Unknown fixed object
(43) Shrubbery or bush	.	71 A
(44) Embankment		n_with Nonfixed Object
(45) B 4 4 4 4	(70)	Passenger car, light truck, van, or other vehicle
(45) Breakaway pole or post (any diame	ter)	not in-transport
	(71)	Medium/heavy truck or bus not in-transport
Nonbreakaway Pole or Post	(76)	Animal
(50) Pole or post (≤ 10 cm in diameter)	(77)	Train
(51) Pole or post (> 10 cm but ≤ 30 cm i		Trailer, disconnected in transport
(52) Pole or post (> 30 cm in diameter)		Object fell from vehicle in-transport
(53) Pole or post (diameter unknown))88\	Other nonfixed object (specify):
(00) I did di podi (didinatal diminati)	(66)	Other Hornixed object (specify).
(54) Concrete traffic barrier	(89)	Unknown nonfixed object
(55) Impact attenuator	()	ommon nomikou object
(56) Other traffic barrier (includes guard	rail) (98)	Other event (specify):
(specify):	(00)	Culci event (speedly).
(960.1)/	(99)	Unknown event or object
	(00)	omalown orone or object

OVERRIDE/UNDERRIDE (THIS VEHICLE)	ACCIDENT RECONSTRUCTION PROGRAMS
51. Front Override/Underride (this Vehicle)	HIGHEST DELTA V
 52. Rear Override/Underride (this Vehicle) (0) No override/underride, or not an end-to-end impact between two CDS applicable vehicles, and no medium/heavy truck or bus underride 	58. Basis for Total (Resultant) Delta V (highest) (00) No vehicle inspection
Override (see specific CDC) [Between 2 CDS applicable vehicles (Bodytype, GV07=1-49)] (1) 1st CDC (2) 2nd CDC (3) Other not automated CDC (specify):	Delta V Calculated (01) Reconstruction program -damage only routine (02) Reconstruction program -damage and trajectory routine (03) Missing vehicle algorithm
Underride (see specific CDC) [Between 2 CDS applicable vehicles (Bodytype, GV07=1-49)] (4) 1st CDC (5) 2nd CDC (6) Other not automated CDC (specify):	Delta V Not Calculated (04) At least one vehicle (which may be this vehicle) is beyond the scope of an acceptable reconstruction program, regardless of collision conditions.
 (7) Medium/heavy truck or bus override (of any configuration) (9) Unknown HEADING ANGLE AT IMPACT FOR 	All vehicles within scope (CDC applicable) of reconstruction program but one of the collision conditions is beyond the scope of the reconstruction
HIGHEST DELTA V	 program or other acceptable reconstruction technique, regardless of adequacy of damage data.
Values: (000)-(359) Code actual value (997) Noncollision (998) Impact with object (999) Unknown 53. Heading Angle For This Vehicle 54. Heading Angle For Other Vehicle RECONSTRUCTION DATA 55.Towed Trailing Unit (0) No towed unit (1) Yes—towed trailing unit (9) Unknown	(05) Rollover (06) Other non-horizontal forces (07) Sideswipe type damage (08) Severe override (09) Yielding object (10) Overlapping damage (11) All vehicle and collision conditions are within scope of one of the acceptable reconstruction programs, but there is insufficient data available, (98) Other, (specify):
56. Documentation of Trajectory Data for This Vehicle (0) No (1) Yes	
57. Post Collision Condition of Tree or Pole (For Highest Delta V) (0) Not collision (for highest delta V) with tree or pole (1) Not damaged (2) Cracked/sheared (3) Tilted <45 degrees (4) Tilted ≥45 degrees (5) Uprooted tree (6) Separated pole from base (7) Pole replaced (8) Other (specify):	

COMPUTER GENERA	ED CRASH SEVERITY
59. Total Delta V 90.5 Nearest kmph (highest) Nearest kmph (secondary) (NOTE: 000 means less than 0.5 kmph) (160) 159.5 kmph and above (999) Unknown Highest 60. Longitudinal Component of Delta V 89.1 Nearest kmph (highest)	Highest 63. Impact Speed — Nearest kmph (highest) — Nearest kmph (secondary) (NOTE: 000 means less than 0.5 kmph) (160) 159.5 kmph and above (998) Trajectory algorithm not run (999) Unknown
Nearest kmph (secondary) [NOTE:000 means greater than -0.5 kmph and less than +0.5 kmph) (±160) ±159.5 kmph and above (999) Unknown Highest 61. Lateral Component of Delta V	64. Confidence In Reconstruction Program Results (For Highest Delta V) (0) No reconstruction (1) Collision fits model — results appear reasonable (2) Collision fits model — results appear high (3) Collision fits model — results appear low (4) Borderline reconstruction — results appear reasonable
Nearest kmph (highest) Nearest kmph (secondary) (NOTE:000 means greater than -0.5 kmph and less than +0.5 kmph) (±160) ±159.5 kmph and above (_999) Unknown 62. Energy Absorption	OTHER SPEED ESTIMATE Highest 65. Barrier Equivalent Speed 73.3 Nearest kmph (highest) Nearest kmph (secondary) (NOTE: 000 means less than 0.5 kmph) (160) 159.5 kmph and above (999) Unknown

IF YES: IS A COMPLETED PROGRAM SUMMARY INCLUDED? [] YES [] NO

ESTIMATED DELTA V		VEHICLE INSPECTION
66. Estimated Highest Delta V (Researcher Determined) (0) Reconstruction Delta V coded Estimated Delta V (1) Less than 10 kmph (2) ≥ 10 kmph but < 25 kmph (3) ≥ 25 kmph but < 40 kmph (4) ≥ 40 kmph but < 55 kmph (5) ≥ 55 kmph Other estimates of damage severity (6) Minor (7) Moderate (8) Severe (9) Unknown	φ	67. Type of Vehicle Inspection (0) No inspection (1) Vehicle fully repaired-no damage evident (2) Partial inspection (specify): (3) Complete inspection

*** IF THE CDS APPLICABLE VEHICLE WAS NOT INSPECTED (I.E., GV67=0), ***

DO NOT COMPLETE THE EXTERIOR AND INTERIOR VEHICLE FORMS

*** IF GV07 DOES NOT EQUAL 01-49, DO NOT COMPLETE ***

THE EXTERIOR VEHICLE, INTERIOR VEHICLE,

OCCUPANT ASSESSMENT, AND OCCUPANT INJURY FORMS.

U.S. Department of Transportation OCCUPANT ASSESSMENT FORM Form Approved O.M.B. No. 2127-0021 National Highway Traffic Safety NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM **OCCUPANT'S SEATING** 1. Primary Sampling Unit Number ABIT 2. Case Number - Stratum 10. Occupant's Seat Position Front Seat 3. Vehicle Number (11) Left side (12) Middle 41 4. Occupant Number (13) Right side (14) Other (specify):_ OCCUPANT'S CHARACTERISTICS (15) On or in the lap of another occupant 5. Occupant's Age Second Seat Code actual age at time of accident. (21) Left side (00) Less than one year old (specify by month): (22) Middle (23) Right side (97) 97 years and older (24) Other (specify): (99) Unknown (25) On or in the lap of another occupant Third Seat 6. Occupant's Sex (31) Left side (1) Male (32) Middle (2) Female-not reported pregnant (33) Right side (3) Female-pregnant-1st trimester(1st-3rd month) (34) Other (specify):_ (4) Female-pregnant-2nd trimester(4th-6th month) (35) On or in the lap of another occupant (5) Female-pregnant-3rd trimester(7th-9th month) (6) Female-pregnant-term unknown Fourth Seat (9) Unknown (41) Left side (42) Middle (43) Right side (44) Other (specify):__ 99 9 7. Occupant's Height (45) On or in the lap of another occupant Code actual height to the nearest centimeter. (97) In or on unenclosed area (999) Unknown (98) Other seat (specify): (99) Unknown inches X 2.54 = ___ centimeters 9 8. Occupant's Weight 9 Code actual weight to the nearest 11. Occupant's Posture kilogram. (0) Normal posture (999) Unknown Abnormal posture (1) Kneeling or standing on seat ____ pounds X .4536 = ___ __ kilograms Lying on or across seat (3) Kneeling, standing or sitting in front of seat 9. Occupant's Role (4) Sitting sideways or turned to talk with another (1) Driver occupant or to look out a rear window (2) Passenger Sitting on a console (9) Unknown Lying back in a reclined seat position Bracing with feet or hands on a surface in front of seat (8) Other abnormal posture (specify): (9) Unknown

EJECTION/ENTRAPMENT				
12. Ejection (0) No ejection (1) Complete ejection (2) Partial ejection (3) Ejection, unknown degree (9) Unknown	Ψ_	15. Medium Status (Immediately Prior To Impact) (0) No ejection (1) Open (2) Closed (3) Integral structure (9) Unknown		
13. Ejection Area (0) No ejection (1) Windshield (2) Left front (3) Right front (4) Left rear (5) Right rear (6) Rear (7) Roof (8) Other area (e.g., back of pickup, etc.) (specify): (9) Unknown	_\$_	16. Entrapment (0) Not entrapped/exit not inhibited (1) Entrapped/pinned - mechanically restrained (2) Could not exit vehicle due to jammed doors, fire, etc. (specify):		
14. Ejection Medium (0) No ejection (1) Door/hatch/tailgate (2) Nonfixed roof structure (3) Fixed glazing (4) Nonfixed glazing (specify): (5) Integral structure (8) Other medium (specify): (9) Unknown	φ_	disoriented (2) Removed from vehicle due to injuries (3) Exited vehicle with some assistance (4) Exited vehicle under own power (5) Occupant fully ejected (9) Unknown		

	BELT SYSTEM FUNCTION				
18.	Manual (Active) Belt System Availability (0) None available (1) Belt removed/destroyed (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt available—type unknown	22. Shoulder Belt Upper Anchorage Adjustment (0) No shoulder belt (1) No upper anchorage adjustment for shoulder belt Adjustable shoulder Belt Upper Anchorage (2) In full up position (3) In mid position			
19.	Integral Belt Partially Destroyed (6) Shoulder belt (lap belt destroyed/removed) (7) Lap belt (shoulder belt destroyed/removed) (8) Other belt (specify): (9) Unknown Manual (Active) Belt System Use (00) None used, not available, or belt removed/destroyed (01) Inoperative (specify): (02) Shoulder belt (03) Lap belt (04) Lap and shoulder belt (05) Belt used—type unknown (08) Other belt used (specify): (12) Shoulder belt used with child safety seat (13) Lap belt used with child safety seat (14) Lap and shoulder belt used with child safety seat	(4) In full down position (5) Position unknown (9) Unknown if position has adjustable upper anchorage adjustment 23. Automatic (Passive) Belt System Availability/ Function (0) Not equipped/not available (1) 2 point automatic belts (2) 3 point automatic belts (3) Automatic belts - type unknown Non-functional (4) Automatic belts destroyed or rendered inoperative (9) Unknown 24. Automatic (Passive) Belt System Use (0) Not equipped/not available/destroyed or rendered inoperative (1) Automatic belt in use (2) Automatic belt not in use (manually disconnected, motorized track inoperative) (specify):			
	(15) Belt used with child safety seat—type unknown (18) Other belt used with child safety seat (specify): (99) Unknown if belt used Proper Use of Manual (Active) Belts (0) None used or not available (1) Belt used properly (2) Belt used properly with child safety seat Belt Used Improperly (3) Shoulder belt worn under arm (4) Shoulder belt worn behind back or seat (5) Belt worn around more than one person	(3) Automátic belt use unknown (9) Unknown 25. Automatic (Passive) Belt System Type (0) Not equipped/not available (1) Non-motorized system (2) Motorized system (9) Unknown 26. Proper Use of Automatic (Passive) Belt System (0) Not equipped/not available/not used (1) Automatic belt used properly (2) Automatic belt used properly with child safety seat			
21.	(6) Lap belt worn on abdomen (7) Lap belt or lap and shoulder belt used improperly with child safety seat (specify): (8) Other improper use of manual belt system (specify): (9) Unknown Manual (Active) Belt Failure Modes During Accident (0) No manual belt used or not available (1) No manual belt failure(s) (2) Torn webbing (stretched webbing not included)	Automatic Belt Used Improperly (3) Automatic shoulder belt worn under arm (4) Automatic shoulder belt worn behind back (5) Automatic belt worn around more than one person (6) Lap portion of automatic belt worn on abdomen (7) Automatic lap and shoulder belt or automatic shoulder belt used improperly with child safety seat (specify): (8) Other improper use of automatic belt system (specify): (9) Unknown			
	 Broken buckle or latchplate Upper anchorage separated Other anchorage separated (specify): Broken retractor Combination of above (specify): Other manual belt failure (specify): Unknown 	27. Automatic (Passive) Belt Failure Modes During Accident (0) Not equipped/not available/not in use (1) No automatic belt failure(s) (2) Torn webbing (stretched webbing not included) (3) Broken buckle or latchplate (4) Upper anchorage separated (5) Other anchorage separated (specify): (6) Broken retractor (7) Combination of above (specify): (8) Other automatic belt failure (specify):			

POLICE REPORTED RESTRAINT USE	AIR BAG SYSTEM FUNCTION
28. Police Reported Belt Use (0) None used (1) Police did not indicate belt use (2) Shoulder belt (3) Lap belt (4) Lap and shoulder belt (5) Belt used, type not specified (6) Child safety seat (7) Automatic belt (8) Other type belt, (specify):	30. Frontal Air Bag System Availability/Function (This Occupant Position) (0) Not equipped/not available (1) Air bag Non-functional (2) Air bag disconnected (specify): (3) Air bag not reinstalled (9) Unknown
(9) Police indicated "unknown" 29. Police Reported Air Bag Availability/Function (0) No air bag available (1) Police did not indicate air bag availability/function (2) Deployed (3) Not deployed (4) Unknown if deployed (9) Police indicated "unknown"	 31. Frontal Air Bag System Deployment (This Occupant Position) (0) Not equipped/not available (1) Deployed during accident (as a result of impact) (2) Deployed inadvertently just prior to accident (3) Deployed, details unknown (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (5) Unknown if deployed (7) Nondeployed (9) Unknown
Check the Primary Source Used In Determining Belt Use. [] Not equipped/not available/destroyed or rendered inoperative [] Vehicle inspection [] Official injury data [] Driver/occupant interview [] Other (specify): Parc. [] Unknown if belt used	32. Other Than First Seat Frontal Air Bag
	 33. Air Bag(s) Deployment, Other Than First Seat Frontal (This Occupant Position) (0) Not equipped with an "other" air bag (1) Deployed during accident (as a result of impact) (2) Deployed inadvertently just prior to accident (3) Deployed, details unknown (4) Deployed as a result of a noncollision event during accident sequence (e.g., fire, explosion, electrical) (5) Unknown if deployed (7) Nondeployed (9) Unknown
	34. Are There Indications of Air Bag System Failure? (This Occupant Position) (0) Not equipped/not available (1) No (2) Yes (specify): (9) Unknown

FIRST SEAT FRONTAL AIR	BAG SYSTEM EVALUATION
 35. Had Vehicle Been in Previous Accident(s)? φ (0) Not equipped/not available (1) No previous accidents Yes (2) Previous accident(s) without deployment(s) (3) One previous accident with deployment (4) More than one previous accident with at least one deployment (8) Previous accidents, unknown deployment status (9) Unknown 	40. Longitudinal Component of Delta V For Air Bag Deployment Impact (-000) Not equipped/not available Code the value of the delta V for the impact that initiated the air bag deployment (-996) Deployment, unknown longitudinal Delta V (-997) Not deployed (-998) Unknown if deployed (-999) Unknown
36. Type of Air Bag (0) Not equipped/not available (1) Original manufacturer installed system (2) Retrofitted air bag (3) Replacement air bag (8) Unknown type of air bag (9) Unknown	 41. Did Air Bag Module Cover Flap(s) Open At Designated Tear Points? (0) Not equipped/not available (1) No (2) Yes (3) Deployed, unknown if flap(s) opened at designated tear points (7) Not deployed (8) Unknown if deployed (9) Unknown
37. Had Any Prior Maintenance/Service Been Performed On This Air Bag System? (0) Not equipped/not available (1) No prior maintenance (2) Yes, prior maintenance (specify): (9) Unknown	42. Were Air Bag Module Cover Flap(s) Damaged? (0) Not equipped/not available (1) No (2) Yes (specify): (3) Deployed, unknown if air bag module cover flap(s) damaged (7) Not deployed (8) Unknown if deployed
38. Air Bag Deployment Accident Event Sequence Number (00) Not equipped/not available Code the accident event sequence number that initiated the air bag deployment (96) Deployed, unknown event (97) Not deployed (98) Unknown if deployed (99) Unknown	(9) Unknown 43. Was There Damage To The Air Bag? (00) Not equipped/not available (01) Not damaged Yes - Air Bag Damage (02) Ruptured (03) Cut (04) Torn
39. CDC For Air Bag Deployment Impact (0) Not equipped/not available (1) Highest delta V (2) Second highest delta V (3) Other non-coded delta V (specify): (6) Deployed, unknown event (7) Not deployed (8) Unknown if deployed (9) Unknown	(05) Holed (06) Burned (07) Abraded (88) Other damage (specify): (95) Damaged, details unknown (96) Deployed, unknown if damaged (97) Not deployed (98) Unknown if deployed (99) Unknown

	FIRST SEAT FRONTAL AIR BAG SYSTEM EVALUATION continued	HEAD RESTRAINT AND SEAT EVALUATION
	Source of Air Bag Damage	49. Head Restraint Type/Damage by Occupant at This Occupant Position (0) No head restraints (1) Integral—no damage (2) Integral—damaged during accident (3) Adjustable—no damage (4) Adjustable—damaged during accident (5) Add-on—no damage (6) Add-on—damaged during accident (8) Other (specify): (9) Unknown 50. Seat Type (this Occupant Position) (00) Occupant not seated or no seat (01) Bucket (02) Bucket with folding back (03) Bench (04) Bench with separate back cushions (05) Bench with folding back(s)
- (((Was The Air Bag Tethered? (0) Not equipped/not available (1) No (2) Yes (specify number of tether straps): (3) Deployed, unknown if tethered (7) Not deployed (8) Unknown if deployed (9) Unknown	(06) Split bench with separate back cushions (07) Split bench with folding back(s) (08) Pedestal (i.e., column supported) (09) Box mounted seat (i.e., van type) (10) Other seat type (specify): (99) Unknown 51. Seat Orientation (this Occupant Position) (0) Occupant not seated or no seat
() () () ()	Did The Air Bag Have Vent Ports? (0) Not equipped/not available (1) No (2) Yes (specify number of vent ports): (3) Deployed, unknown if vent ports present (7) Not deployed (8) Unknown if deployed (9) Unknown	(1) Forward facing seat (2) Rear facing seat (3) Side facing seat (inward) (4) Side facing seat (outward) (8) Other (specify): (9) Unknown 52. Seat Track Adjusted Position Prior To Impact (0) Occupant not seated or no seat
47. V	Was the Air Bag in this Occupant's Position Contacted by Another Occupant? O) Not equipped/not available 1) No 2) Yes (specify): Deployed, unknown if other occupant contact to air bag 7) Not deployed 8) Unknown if deployed 9) Unknown	(1) Non-adjustable seat track Adjustable Seat Track (2) Seat at forward most track position (3) Seat between forward most and middle track positions (4) Seat at middle track position (5) Seat between middle and rear most track positions (6) Seat at rear most track position (9) Unknown
() (2 (4 (7 (8	Nas This Occupant Wearing Eye-wear? 0) Not equipped/not available 1) No 2) Eyeglasses/sunglasses 3) Contact lenses 4) Deployed, unknown if eyewear worn 7) Not deployed 8) Unknown if deployed 9) Unknown	

HEAD RESTRAINT AND SEAT EVALUATION continued

9

- 53. Seat Back Incline Prior and Post Impact
 - (00) Occupant not seated or no seat
 - (01) Not adjustable

Upright prior to impact

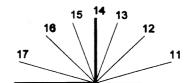
- (11) Moved to completely rearward position
- (12) Moved to rearward midrange position
- (13) Moved to slightly rearward position
- (14) Retained pre-impact position
- (15) Moved to slightly forward position
- (16) Moved to forward midrange position
- (17) Moved to completely forward position

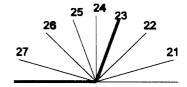
Slightly reclined prior to impact

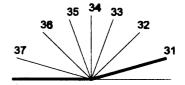
- (21) Moved to completely rearward position
- (22) Moved to rearward midrange position
- (23) Retained pre-impact position
- (24) Moved to upright position
- (25) Moved to slightly forward position
- (26) Moved to forward midrange position
- (27) Moved to completely forward position

Completely reclined prior to impact

- (31) Retained pre-impact position
- (32) Moved to rearward midrange position
- (33) Moved to slightly rearward position
- (34) Moved to upright position
- (35) Moved to slightly forward position
- (36) Moved to forward midrange position
- (37) Moved to completely forward position
- (99) Unknown
- 54. Seat Performance (this Occupant Position)
 - (0) Occupant not seated or no seat
 - (1) No seat performance failure(s)
 - (2) Seat adjusters failed
 - (3) Seat back folding locks or "seat back" failed (specify):
 - (4) Seat track/anchors failed
 - (5) Deformed by impact of occupant
 - (6) Deformed by passenger compartment intrusion, (specify):
 - (7) Combination of above (specify):
 - (8) Other (specify):
 - (9) Unknown







			CHIL	D SAF	ET	Y SE	AT		
55.		fety Seat Make/Model o child safety seat	4 4	φ	58.	Child	Safety Seat Harness Usage	4	q
	Applicabl Data Col (950) Bu	o child safety seat le codes are found in your NA llection, Coding and Editing uilt-in child safety seat ther make/model (specify):	SS CDS		59.	Child	Safety Seat Shield Usage	_4	4
		nknown make/model			60.	Child	Safety Seat Tether Usage	4	4
		nknown if child safety seat use	ed	4		Varia	Options below applicable to bles OA58-OA60.		
56.	(0) No cl	Child Safety Seat hild safety seat		φ		, ,	No child safety seat		
	(4) Boos (5) Boos		'y) :			(01) (02) (03)	Designed With Harness/Shield/Tether After market harness/shield/tether added, not used After market harness/shield/tether u Child safety seat used, but no after i harness/shield/tether added	sed	t
		nown child safety seat type nown if child safety seat used		-		(09)	Unknown if harness/shield/tether added or used		
5 7.		ety Seat Orientation child safety seat	_ 4	4_		(11) (12)	gned With Harness/Shield/Tether Harness/shield/tether not used Harness/shield/tether used Unknown if harness/shield/tether us	ed	
	(01) Rea (02) For	d for Rear Facing for This Age ar facing ward facing ner orientation (specify):	/Weight			(21) (22)	own If Designed With Harness/Shield Harness/shield/tether not used Harness/shield/tether used Unknown if harness/shield/tether us		er
	(09) Unk	known orientation					Unknown if child safety seat used		
	(11) Rea (12) Fon	d For Forward Facing for This ar facing ward facing er orientation (specify):	Age∕Weig	ght					
	(19) Unk	known orientation							
	<i>Age/Weig</i> (21) Rea (22) For	Design or Orientation For Thank, or Unknown Age/Weight ar facing ward facing eer orientation (specify):	is						
	(29) Unk	known orientation							
	(99) Unk	known if child safety seat used							
					1				

INJURY CONSEQUENCES			
	9	63. Type Of Medical Facility (for Initial Treatment) (0) Not treated at a medical facility (1) Trauma center (2) Hospital (3) Medical clinic (4) Physician's office (5) Treatment later at medical facility (8) Other (specify): (9) Unknown 64. Hospital Stay (00) Not Hospitalized Code the number of days (up through 60) that the occupant stayed in hospital. (61) 61 days or more (99) Unknown 65. Working Days Lost Code the number of days (up through 60) that the occupant lost from work due to the accident (00) No working days lost (61) 61 days or more (62) Fatally injured (97) Not working prior to accident (99) Unknown	
STOP	WO	RK HERE	

VARIABLES 66-74

TO BE CODED BY THE ZONE CENTER

TO BE CODED BY THE ZONE CENTER

TRAUMA DATA
71. Glasgow Coma Scale (GCS) Score (at Medical Facility) (00) Not injured (01) Injured - not treated at medical facility (02) No GCS Score at medical facility (03-15) Code the actual value of the initial GCS Score recorded at medical facility. (97) Injured, details unknown (99) Unknown if injured
72. Was the Occupant Given Blood? (1) No - blood not given (2) Yes - blood given
(specify units):(9) Unknown if blood given
73. Arterial Blood Gases (ABG) – HCO ₃ <u>97</u> (00) Not injured (01) Injured, ABGs not measured or reported (02-50) Code the actual value of the HCO ₃ (96) ABGs reported, HCO ₃ unknown (97) Injured, details unknown (99) Unknown if injured
BELT USE DETERMINATION
74. Primary Source of Belt Use Determination (0) Not equipped/not available/destroyed or rendered inoperative (1) Vehicle inspection (2) Official injury data (3) Driver/occupant interview (8) Other (specify):



U.S. Department of Transportation **National Highway Traffic Safety** Administration

CRASHPC PROGRAM SUMMARY NATIONAL ACCIDENT SAMPLING SYSTEM CRASHWORTHINESS DATA SYSTEM

Identifying Title	AB 17	(# /		
Primary Sampling Unit	Case NoStratum		ccident Event equence No.	Date (Month, day, year) o	of Run
CRASHPC Vehicle Id		_			
Vehicle 1	1994	PLYADO	174	VOYAGER	
Vehicle 2	1983	BUICK		LESABRE	
	Year	Make		Model	NASS Veh. No.
	GE	NERAL IN	IFORMATIO	N	
	VEHICLE I	_		VEHICLE 2	
Size		_5	Size		4
Weight 3512 + 487 +	= 4059 LB	s kg	Weight <i>3614</i> ₊ ≈,		66 kg
Curb Occupant(s) Ca	argo	W7	Curb Occup	pant(s) Cargo	EW6
PDOF (-180 to +180)	+5	•	PDOF (-180	to +180) +	+10 .
Stiffness		41	Stiffness	_	4 5
	S	CENE INF	ORMATION		
Rest and Impact Posit	ions [] No, Go To Dar				
	VEHICLE 1			VEHICLE 2	
Rest Position	x	m	Rest	x	m
POSIDON	Υ	m	Position	Υ	m
	PSI	 •		PSI _	· · · · · · · · · · · · · · · · · · ·
Impact	X	. m	Impact	X	. m
Position	Υ	. m	Position	Υ	m
	PSI			PSI	•
Slip Angle(-180 to +18	30)	<u> </u>	Slip Angle (-	180 to +180)	°
		VEHICLE	MOTION		
Sustained Contact [j No [] Yes VEHICLE 1			VEHICLE 2	
	••••••••••••••••••••••••••••		Vehicle Rota	tion []No []Yes
/enicle Rotation Rotation Stop Bef	[] No ore Rest [] No	[]Yes []Yes	Rotation	Stop Before Rest []No []Yes
End of Rotation Position	x	. m	End of R Position		m
Position	Υ		,	Υ	· m
	PSI	•		PSI _	°
Curved Path	[] No	f llyee	Curved Path	I] No [] Yes
Point on Path] Yes	Point on		
X	m Y	m	×	m Y	m
Rotation Direction Rotation >360° [[]None []CW [*****************************	oction []None [360° []No []Yes	JCW []CCW

National Accident Sampling System-Crashworthiness Data System: CRASHPC Program Summary

FRICTION IN	FORMATION	TRAJECTOR	YINFORMATION		
Coefficient of Friction		Trajectory Data [] No [] Yes			
Rolling Resistance Option	·	If No, Go To Damage In	formation		
		Vehicle 1 Steer Angles			
Vehicle 1 Rolling Resist		LF	• RF •		
1	RF	LR	• RR •		
LR	RR				
Vehicle 2 Rolling Resist	tance	Vehicle 2 Steer Angles			
_	RF	LF	° RF ° .		
	RR				
		Terrain Boundary []	No []Yes		
		First Point			
		X	Y m		
		Second Point			
		X	Y m		
	اخر	Secondary Coefficient of			
		·	Friction		
		FORMATION			
VELIC	CLE 1 Indes	\/=\	HICLE 2		
VEHIC	IE N	, VL	HOLL Z		
Damage Length	L622_ cm	Damage Length	L <u>70,</u> cm		
	(, 2, 1		L 70. cm		
Damage Length Crush Depths	L62,2cm	Damage Length Crush Depths			
Damage Length Crush Depths	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	Damage Length Crush Depths	Lcm C,22cm		
Damage Length Crush Depths	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	Damage Length	$\begin{array}{cccccccccccccccccccccccccccccccccccc$		
Damage Length Crush Depths	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	Damage Length Crush Depths	$\begin{array}{cccccccccccccccccccccccccccccccccccc$		
Damage Length Crush Depths	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	Damage Length Crush Depths	$\begin{array}{cccccccccccccccccccccccccccccccccccc$		
Damage Length Crush Depths	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	Damage Length Crush Depths	$\begin{array}{cccccccccccccccccccccccccccccccccccc$		
Damage Length Crush Depths Au' DI MECTOS) (ALO AL MIDIOS) Damage Offset	L $\frac{62.2}{\text{cm}}$ cm C ₁ $\frac{9.0}{\text{cm}}$ cm C ₂ $\frac{18.0}{\text{cm}}$ cm C ₃ $\frac{34.0}{\text{cm}}$ cm C ₄ $\frac{42.0}{\text{cm}}$ cm C ₅ $\frac{52.0}{\text{cm}}$ cm C ₆ $\frac{54.0}{\text{cm}}$ cm	Crush Depths 53 Depth Photos	L		
Damage Length Crush Depths Au' Di MECO ((LO 4)	L $\frac{62.2}{\text{cm}}$ cm C ₁ $\frac{9.0}{\text{cm}}$ cm C ₂ $\frac{18.0}{\text{cm}}$ cm C ₃ $\frac{34.0}{\text{cm}}$ cm C ₄ $\frac{42.0}{\text{cm}}$ cm C ₅ $\frac{52.0}{\text{cm}}$ cm C ₆ $\frac{54.0}{\text{cm}}$ cm	Damage Length Crush Depths 53 Depth (CRUM) Crush Depths 53 Depth (CRUM) Damage Offset	L		
Damage Length Crush Depths Au' DI MECTOS) (ALO AL MIDIOS) Damage Offset	L $\frac{62.2}{\text{cm}}$ cm C ₁ $\frac{9.0}{\text{cm}}$ cm C ₂ $\frac{18.0}{\text{cm}}$ cm C ₃ $\frac{34.0}{\text{cm}}$ cm C ₄ $\frac{42.0}{\text{cm}}$ cm C ₅ $\frac{52.0}{\text{cm}}$ cm C ₆ $\frac{54.0}{\text{cm}}$ cm	Damage Length Crush Depths 53 Depth (Count of the Count	L		
Damage Length Crush Depths A Company (Acompany) Damage Offset Model Year: Make:	L $\frac{62.2}{\text{cm}}$ cm C ₁ $\frac{9.0}{\text{cm}}$ cm C ₂ $\frac{18.0}{\text{cm}}$ cm C ₃ $\frac{34.0}{\text{cm}}$ cm C ₄ $\frac{42.0}{\text{cm}}$ cm C ₅ $\frac{52.0}{\text{cm}}$ cm C ₆ $\frac{54.0}{\text{cm}}$ cm	Damage Length Crush Depths 53 Depth (Count of the Count	L		
Damage Length Crush Depths April Directions) (Acord Model: Model:	L $\frac{62.2}{\text{cm}}$ cm C ₁ $\frac{9.0}{\text{cm}}$ cm C ₂ $\frac{18.0}{\text{cm}}$ cm C ₃ $\frac{34.0}{\text{cm}}$ cm C ₄ $\frac{42.0}{\text{cm}}$ cm C ₅ $\frac{52.0}{\text{cm}}$ cm C ₆ $\frac{54.0}{\text{cm}}$ cm	Damage Length Crush Depths 53 Depth (Count of the Count	L		
Damage Length Crush Depths A Control (Acontrol Damage Offset Model Year: Make:	L $\frac{62.2}{\text{cm}}$ cm C ₁ $\frac{9.0}{\text{cm}}$ cm C ₂ $\frac{18.0}{\text{cm}}$ cm C ₃ $\frac{34.0}{\text{cm}}$ cm C ₄ $\frac{42.0}{\text{cm}}$ cm C ₅ $\frac{52.0}{\text{cm}}$ cm C ₆ $\frac{54.0}{\text{cm}}$ cm	Damage Length Crush Depths 53 Depth (Count of the Count	L		

CASE NUMBER AB17 - IMPACT NO. 1 - FRONT TO FRONT

SPEED CHANGE		TOTAL (KPH)	LONG. (KPH)	LAT.(KPH)	ANG. (DEG)
(DAMAGE)	VEH #1	84.4	-84.1	7.4	-5.0
	VEH #2	90.5	-89.1	-15.7	10.0

ENERGY DISSIPATED BY DAMAGE VEH#1:757405.3 JOULES VEH#2:360010.6 JOULES

```
(* INDICATES DEFAULT VALUE)
SUMMARY OF DAMAGE DATA
                                     VEHICLE # 2
         VEHICLE # 1
                                  TYPE-----CATEGORY 4
TYPE-----CATEGORY 5
STIFFNESS---CATEGORY 7
                                  STIFFNESS---CATEGORY 4
                                  WEIGHT----- 1717.3 KGS
WEIGHT---- 1841.2 KGS
                                  CDC-----12FDEW6
CDC-----12FZEW7
L----- 158.0 CM.
                                  L----- 177.8 CM.
55.9 CM.
48.3 CM.
76.2 CM.
                                  C1-----
                                  C2-----
                                  С3----
                                  C4----- 101.6 CM.
                                  C5-----
                                              144.8 CM.
                                  C6-----
C6----- 137.2 CM.
                                              170.2 CM.
                                  D-----
                                               21.6 CM.
            20.6 CM.
RHO----
                                  RHO----
                                               1.00
           1.00
ANG----
                                  ANG-----
                                               10.0 DEG.
            -5.0 DEG.
                                  D'----
                                               42.3 CM.
D,-----
            39.0 CM.
                 DIMENSIONS AND INERTIAL PROPERTIES
```

A1	=	142.5	CM.	A2	=	138.9	CM.
B1	_	160.0	CM.	B2	=	150.4	CM.
TR1	_Y =	161.8	CM.	TR2	=	157.0	CM.
I1	=	481714	.4 NEWT-SEC**2-CM	12	=	416061.	5 NEWT-SEC**2-CM
M1	=	18.482	NEWT-SEC**2/CM	M 2	=	17.239	NEWT-SEC**2/CM
XF1	=	258.6	CM.	XF2	22	251.0	CM.
XR1	=	-309.6	CM.	XR2	=	-289.6	CM.
YS1	=	101.3	CM.	YS2	=	97.8	CM.

CASE NUMBER AB17 - IMPACT NO. 1 - FRONT TO FRONT

SPEED CHANGE		TOTAL (MPH)	LONG. (MPH)	LAT. (MPH)	ANG. (DEG)
(DAMAGE)	VEH #1	52.5	-52.3	4.6	-5.0
,,	VEH #2	56.2	-55.4	-9.8	10.0

ENERGY DISSIPATED BY DAMAGE VEH#1:558558.5 FT-LB.

VEH#2:265494.6 FT-LB.

```
(* INDICATES DEFAULT VALUE)
SUMMARY OF DAMAGE DATA
                                       VEHICLE # 2
         VEHICLE # 1
TYPE----CATEGORY 5
                                     TYPE-----CATEGORY 4
                                     STIFFNESS---CATEGORY 4
STIFFNESS---CATEGORY 7
                                    WEIGHT---- 3786.0 LBS.
WEIGHT---- 4059.0 LBS.
                                     CDC-----12FDEW6
CDC-----12FZEW7
                                     L-----
                                                  70.0 IN.
L----- 62.2 IN.
                                     C1-----
                                                  22.0 IN.
C1-----
             9.0 IN.
                                    C2-----
                                                19.0 IN.
C2----
           18.0 IN.
           34.0 IN.
                                    С3-----
C3-----
                                                  30.0 IN.
                                     C4-----
                                                  40.0 IN.
C4-----
             42.0 IN.
                                    C5----
                                                  57.0 IN.
C5-----
             52.0 IN.
                                    C6----
                                                  67.0 IN.
C6-----
             54.0 IN.
                                                   8.5 IN.
D-----
              8.1 IN.
RHO-----
                                     RHO----
                                                  1.00
             1.00
                                     ANG-----
                                                  10.0 DEG.
ANG----
             -5.0 DEG.
                                     D'----
                                                  16.6 IN.
            15.4 IN.
                  DIMENSIONS AND INERTIAL PROPERTIES
       56.1
                                            54.7
A1
    =
                IN.
                                                   IN.
                                   B2
                                            59.2
                                                   IN.
                IN.
        63.0
B1
                                   TR2
                                       =
                                            61.8
                                                   IN.
TR1
     = 63.7
                IN.
                                             36826.4 LB-SEC**2-IN
         42637.4 LB-SEC**2-IN
                                   12
                                        =
I1
                                                  LB-SEC**2/IN
    = 10.554
              LB-SEC**2/IN
                                   M2
                                            9.844
M1
    = 101.8
= -121.9
                                   XF2
                                        =
                                            98.8
                                                   IN.
                IN.
XF1
                                       = -114.0
                                                   IN.
XR1
                IN.
                                   XR2
        39.9
                IN.
                                   YS2
                                            38.5
                                                   IN.
YS1
```

CASE NO. AB17 - VEHICLE 1 V. FIXED OBJECT

ENERGY DISSIPATED BY DAMAGE VEH#1:558558.5 FT-LB.

SPEED CHANGE TOTAL (MPH) (DAMAGE) VEH #1 60.3 VEH #2 .0	LONG. (MPH)	LAT.(MPH)	ANG. (DEG)
	-60.1	5.3	-5.0
	.0	.0	.0

VEH#2: .0 FT-LB.

(* INDICATES DEFAULT VALUE) SUMMARY OF DAMAGE DATA VEHICLE # 2 VEHICLE # 1 TYPE-----CATEGORY 11 STIFFNESS---CATEGORY 0 TYPE-----CATEGORY 5 STIFFNESS---CATEGORY 7 WEIGHT----- 4059.0 LBS. WEIGHT-----1000000.0 LBS. CDC----BARRIER L-----.0 IN. C1----9.0 IN. .0 IN. 18.0 IN. C2----C2-----.0 IN. .0 IN. С3-----C3-----34.0 IN. C4----C4-----42.0 IN. .0 IN. C5-----52.0 IN. .0 IN. C6-----.0 IN. C6----54.0 IN. D-----.0 IN. D-----8.1 IN. RHO----RHO-----1.00 1.00 ANG----.0 DEG. ANG-----5.0 DEG. D'-----.0 IN. 15.4 IN.

DIMENSIONS AND INERTIAL PROPERTIES

A1	=	56.1	IN.	A 2	=	50.0	IN.
B1	*	63.0	IN.	B2	-	50.0	IN.
TR1	=	63.7	IN.	TR2	=	50.0	IN.
I1	=	42637.	4 LB-SEC**2-IN	12	=260	0104000.	D LB-SEC**2-IN
M1	**	10.554	LB-SEC**2/IN	M2	=260	0.104	LB-SEC**2/IN
XF1	=	101.8	IN.	XF2	=	50.0	IN.
XR1	22	-121.9	IN.	XR2	=	-50.0	IN.
YS1	=	39.9	IN.	YS2	=	50.0	IN.

CASE NO. AB17 - VEHICLE 1 V. FIXED OBJECT

SPEED CHANGE		TOTAL (KPH)	LONG. (KPH)	LAT. (KPH)	ANG. (DEG)
(DAMAGE)	VEH #1	97.0	-96.7	8.5	-5.0
	VEH #2	.0	.0	.0	.0

ENERGY DISSIPATED BY DAMAGE VEH#1:757405.3 JOULES VEH#2: .0 JOULES

SUMMARY OF DAMAGE DATA	(* INDICATES DEFAULT VALUE)
VEHICLE # 1	VEHICLE # 2
TYPECATEGORY 5	TYPECATEGORY 11
STIFFNESSCATEGORY 7	STIFFNESSCATEGORY 0
WEIGHT 1841.2 KGS	WEIGHT 453600.0 KGS *
CDC12FZEW7	CDCBARRIER
L 158.0 CM.	L0 CM. *
C1 22.9 CM.	C10 CM. *
C2 45.7 CM.	C20 CM. *
C3 86.4 CM.	C30 CM. *
C4 106.7 CM.	C40 CM. *
C5 132.1 CM.	C50 CM. *
C6 137.2 CM.	C60 CM. *
D 20.6 CM.	D0 CM. *
RHO 1.00 *	RHO 1.00 *
ANG5.0 DEG.	ANG0 DEG. *
D' 39.0 CM.	D'0 CM.

DIMENSIONS AND INERTIAL PROPERTIES

A1	=	142.5	CM.	A 2	=	127.0	CM.
B1	=	160.0	CM.	B2	=	127.0	CM.
TR1	=	161.8	CM.	TR2	=	127.0	CM.
11	=	481714	.4 NEWT-SEC**2-CM	12	=*	*****	** NEWT-SEC**2-CM
M1	=	18.482	NEWT-SEC**2/CM	M2	=4!	553.302	NEWT-SEC**2/CM
XF1	=	258.6	CM.	XF2	=	127.0	CM.
XR1	=	-309.6	CM.	XR2	==	-127.0	CM.
YS1	=	101.3	CM.	YS2	=	127.0	CM.

CASE NUMBER AB17 - VEHICLE 2 V. FIXED OBJECT

SPEED CHANGE (DAMAGE)	VEH #1 VEH #2	TOTAL(KPH) 73.3 .0	LONG. (KPH) -72.2 .0	LAT.(KPH) -12.7 .0	ANG. (DEG) 10.0 .0
ENERGY DISSIPATED	BY DAMAGE	VEH#1:360010	.6 JOULES	VEH#2:	.0 JOULES

SUMMARY OF DAMAGE DAT VEHICLE #		(* INDICATES DEFAULT VAI VEHICLE # 2	LUE)	
TYPECATEGORY STIFFNESSCATEGORY WEIGHT 1717.3 CDC12FDEW6	4	TYPECATEC STIFFNESSCATEC WEIGHT 453 CDCBARRI	GORY 0	*
L 177.8	CM.	L	.0 CM.	*
C1 55.9	CM.	C1	.0 CM.	*
C2 48.3	CM.	C2	.0 CM.	*
C3 76.2		C3	.0 CM.	*
C4 101.6	CM.	C4	.0 CM.	*
C5 144.8	CM.	C5	.0 CM.	*
C6 170.2	CM.	C6	.0 CM.	*
D 21.6		D	.0 CM.	*
RHO 1.00	*	RHO	1.00	*
ANG 10.0	DEG.	ANG	.0 DEG.	*
D' 42.3		D'	.0 CM.	

DIMENSIONS AND INERTIAL PROPERTIES

ΑI	=	138.9	CM.	MZ	-	127.0	CM.
B1	=	150.4	CM.	B2	=	127.0	CM.
TR1	=	157.0	CM.	TR2	=	127.0	CM.
I1	=	416061	.5 NEWT-SEC**2-CM	12	=*	******	** NEWT-SEC**2-CM
M1	==	17.239	NEWT-SEC**2/CM	M2	=4	553.302	NEWT-SEC**2/CM
XF1	=	251.0	CM.	XF2	=	127.0	CM.
XR1	=	-289.6	CM.	XR2	=	-127.0	CM.
YS1	=	97.8	CM.	YS2	=	127.0	CM.

CASE NUMBER AB17 - VEHICLE 2 V. FIXED OBJECT

SPEED CHANGE (DAMAGE)	VEH #1 VEH #2	TOTAL (MPH) 45.6 .0	LONG. (MPH) -44.9 .0	LAT.(MPH) -7.9 .0	ANG. (DEG) 10.0 .0
ENERGY DISSIPATED	BY DAMAGE	VEH#1:265494	.6 FT-LB.	VEH#2:	.0 FT-LB.

SUMMARY OF DAMAGE DATA VEHICLE # 1	(* INDICATES DEFAULT VALUE) VEHICLE # 2
TYPECATEGORY 4	TYPECATEGORY 11
STIFFNESSCATEGORY 4	STIFFNESSCATEGORY 0
WEIGHT 3786.0 LBS.	WEIGHT1000000.0 LBS. *
CDC12FDEW6	CDCBARRIER
L 70.0 IN.	L0 IN. *
C1 22.0 IN.	C10 IN. *
C2 19.0 IN.	C20 IN. *
C3 30.0 IN.	C30 IN. *
C4 40.0 IN.	C40 IN. *
C5 57.0 IN.	C50 IN. *
C6 67.0 IN.	C60 IN. *
D 8.5 IN.	D0 IN. *
RHO 1.00 *	RHO 1.00 *
ANG 10.0 DEG.	ANG0 DEG. *
D' 16.6 IN.	D'0 IN.
DIMENSIONS AND	INERTIAL PROPERTIES
A1 = 54.7 IN.	A2 = 50.0 IN.
$B1 = 59.2 ext{ IN.}$	B2 = 50.0 IN.
TR1 = 61.8 IN.	TR2 = 50.0 IN.
I1 = 36826.4 LB-SEC**2+IN	I2 =2600104000.0 LB-SEC**2-IN
M1 = 9.844 LB-SEC**2/IN	M2 = 2600.104 LB-SEC**2/IN
XF1 = 98.8 IN.	XF2 = 50.0 IN.
XR1 = -114.0 IN.	XR2 = -50.0 IN.
YS1 = 38.5 IN.	YS2 = 50.0 IN.

DSI-95-AB-17

Medical Records

DIAGNOSES:

- 1. Blunt force trauma to head
 - A. Skull fracture
 - B. Atlanto-occipital dislocation
 - C. Subarachnoid hemorrhage and small subdural hemorrhage
 - D. Cerebral edema
 - E. Multiple streak hemorrhages of brain
- 2. Blunt force trauma to extremities with apparent fracture of left radius
- 3. Blunt force trauma to chest and abdomen, with repaired rupture of mid jejunum
 - 4. Abrasion and contusion of integument

OPINION:

Death is due to complications of multiple blunt force injuries.

CIRCUMSTANCES OF DEATH:

The decedent is a 6 year old white boy (date of birth:

who was a passenger in a vehicle which was involved in a traffic accident in Alamosa County and transported to Hospital. The decedent had suffered abdominal and head injuries. He was pronounced brain dead at 4:46 P.M. on the

Permission was granted for organ harvesting, which was

completed on the

IDENTIFICATION:

Identification was made visually by the decedent's mother at the hospital. Thirty-five mm. photographs and fingerprints are obtained.

CIRCUMSTANCES OF THE POSTMORTEM EXAMINATION:

A postmortem examination on the body of ' ols is performed at the coroner's Office beginning at 8:30 A.M. on the

GENERAL DESCRIPTION:

The donor name on the top of the pox is stamped

. The seals are broken and the contents are revealed to consist of a sealed styrofoam box sealed with red tape, and another piece of paper that indicates the donor name

the CORS number and describes the contents of the styrofoam box. The styrofoam box is opened to reveal two gray top tubes of light yellow fluid, an apparently empty lavender top tube, and three gray top tubes and one lavender top tube of what appears to be blood. These are taped and submitted to the Toxicology Laboratory per routine.

The body is unwrapped to reveal the body of a child consistent with the stated age. No clothing or effects are submitted with the body.

EVIDENCE OF MEDICAL INTERVENTION:

A vertical midline incision, sewn shut, extends from the sternal notch down to the symphysis pubis. From the xiphoid down to the pubis, there is evidence of at least one other laparotomy, with several punctate holes oriented along the incision, suggestive of old suture holes.

An intracranial pressure bolt is in place in the right frontal scalp.

The eyes have been taped shut with cloth tape.

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A nasogastric tube is in place in the right nostril, and an orotracheal tube is in place in the mouth.

A multilumen catheter is sutured in place in the right subclavian region.

Bilateral chest tubes are sutured in place on either side of the chest.

Intravascular lines are observed in the right antecubital fossa, lateral right wrist, and left side of the groin. There are additional needle punctures in the right forearm, left antecubital fossa, back of the left hand, and cutdown sites in the right and left medial ankles. The cutdown sites have been closed and covered with pressure bandages. There is a pressure bandage over the left groin line, which also covers a surgical incision which extends obliquely across the left groin. The right groin is covered with a pressure type bandage, which covers a 3 inch vertical incision which has been closed.

A Foley catheter is in place in the urethra.

A coroner's identification bracelet bearing the name is around the right wrist, and a tag around the right bears the decedent's name.

SCARS AND IDENTIFYING MARKS: None.

EXTERNAL EXAMINATION:

The body is that of a normally developed, apparently well nourished white boy who appears his stated age, is 66 pounds, and 50.5 pounds. The body is well preserved but not embalmed, is cold to touch and has been refrigerated. Rigidity is fully developed in all muscle groups. Lividity is not readily apparent.

Injuries will be described separately.

The brown, up to 1 inch long scalp hair is without balding or thinning. The facies is altered by injury, and is extensively swollen. The irides are brown. The conjunctivae and sclerae are edematous, with scattered petechial hemorrhages. The ear lobes are uncreased and unpierced. The nose does not grate upon palpation. The lips exhibit only superficial abrasions and scattered contusions intimately associated with medical appliances. The previously described oral airway is in the mouth, as well as another orogastric tube in place in the mouth. The trachea is in the midline. There is no palpable adenopathy in any of the major lymph node regions. The chest, apart from injury, is symmetric. The abdomen is soft, flat, free of masses. The genitalia are

those of a normal circumcised boy. Only one testicle is palpable within the edematous scrotum. The previously described Foley catheter is in place in the urethra. No secondary hair is developed.

The upper extremities are normally formed. All digits are present. A transcapillary oximeter is adherent to the tip of the right index finger. The fingernails are short, approximating the fingertips. None of the nails is torn. The left hand and forearm are markedly edematous, and exhibit scattered petechial type hemorrhages. There appears to be some crepitation around the distal left radius and ulna, particularly the radius, suggesting fracture. The lower extremities are normally formed. All digits are present. The back is essentially unremarkable. The anus is normal.

EXTERNAL EVIDENCE OF INJURY:

HEAD:

A fine, cloth weave type abrasion extends around the forehead obliquely, over an area 5.5 inches by 1.25 inches in dimension. Bruising is minimal. There is extensive purple periorbital discoloration and swelling on the left, and although there is dried clotted blood around the right ocular fissure, there is minimal swelling. Some of this same cloth weave abrasion is observed on the right eyelid. The face is rather asymmetric, with swelling of the left forehead and periorbital region, and right mandibular region. There is some fine brownish abrasion over the entire right cheek and chin, 3.5 inches in greatest dimension, and similar abrasion is observed in patches on the edge of the nose, left cheek, and left corner of the mouth. Faint reddish abrasion/contusion is observed in the same distribution. In some areas it appears to have an almost fine to coarse cloth weave pattern. There is some faint reddish contusion over the swollen right ear, while the left ear is essentially unremarkable. A patch of fine brushburn abrasion is on the lateral aspect of the right side of the neck 3 inches in greatest dimension, which is behind the right ear. There is rather extensive swelling associated with this.

EXTREMITIES:

Bruising with punctate abrasion extends over much of the right forearm and upper arm in patches up to 2.5 inches in size. In some areas there appears to be a petechial type appearance to the injuries. No definite pattern is noted. No fractures are palpated nor joint dislocations noted.

The right leg exhibits similar patchy bruises and punctate abrasions, in patches extending all along the anterior surfaces. On the anterior medial right thigh, the abrasion/contusions take

on some linear and angular configurations, although a definite pattern is not recognized. There is an older abrasion over the right knee, which appears to predate the predominant injuries. In addition to the bruises and abrasions noted, there may also be a needle puncture on the top of the right foot. There is a subungual hematoma involving the right great toe which extends out from under the nail. A faint pattern injury wraps around the back of the right upper leg, which is comprised of several very faint, vertical, linear abrasions spaced 1 cm. apart.

Similar patches of punctate abrasion, contusions and larger patches of purple-red bruising are observed all along the anterior, lateral and medial surfaces of the left leg, with only involvement of the posterior surface. The injuries minimal exhibit no discrete pattern. Again, there are abrasions on the left knee clustered over an area 1 inch, some of which appear to predate the predominance of injuries. No definite fractures are palpated nor joints dislocated. There are some linear abrasions extending obliquely across the posterior lateral left thigh.

In addition to the fractures on the left arm already described, there are extensive ecchymoses with petechial type change involving much of the left hand, with extensive swelling. pattern injuries are noted.

TRUNK:

are numerous patches of punctate abrasion/contusion, exhibiting an almost petechial type appearance, extending along much of the right side of the chest and abdomen, and in areas along the left chest, abdomen and left shoulder. Another isolated area is observed just below the neck. Within these superficial areas of injury are some deeper, red-brown abrasions, many of them oriented along the surgical incision, and may be iatrogenic. However, there is an almost rectangular appearing injury on the anterolateral right flank, 1.75 inches long and almost 0.5 inch wide, which exhibits along the posterior edge an almost cloth weave or ribbing type pattern. Below this is a curved, 0.75 inch abrasion. Below this is a patch of fine linear abrasion contusions extending over an area 2.5 inches in dimension. Some of the injuries resemble injuries that might be caused by an elasticized waistband; predominantly vertical, but not parallel fine linear There are extensive ecchymoses around the surgical incisions in both sides of the groin, but separate from that is a 1.5 inch area of purple-red to green bruising in the left lower abdominal quadrant. No pattern is apparent. A few patches of bruising wrap around the right side of the trunk and extend over an area 2.5 inches. There is another area of purple bruising over the sacrum.

INTERNAL EVIDENCE OF INJURY:

Subscalpular hemorrhage diffusely coats the frontal, parietal and part of the left temporal occipital scalp. A skull fracture extends from the left sphenoid wing, through the left frontal bone, and branches toward the midline but does not cross it. One posterior branch of this fracture extends into the coronal suture and sagittal suture, having very slight diastasis. Subarachnoid hemorrhage diffusely coats the brain, and a few cc. of subdural blood clot are observed over the left occipitoparietal brain. The brain is markedly softened, and is fixed in formalin for later sectioning.

The intracranial pressure bolt is admitted through a defect in the right side of the frontal skull. The atlanto-occipital ligaments, particularly on the left, are lacerated, causing a gaping 1 cm. hemorrhagic defect. The anterior ligaments are loosened, but not torn, and the right ligaments are only slightly torn, with only a slight degree of movement. The upper cervical cord is softened.

INTERNAL EXAMINATION:

The left chest tube is inserted in the 7th intercostal space, while the right is in the 6th intercostal space. A small amount of hemorrhage is observed.

The normal orientation of the bowel has been disrupted by organ harvesting. The heart lies loose within the right chest cavity, having been severed from its vascular attachments. The lungs are expanded, filling the chest cavity. Approximately 500 cc. of bloody fluid fill the common chest cavity. The diaphragms have been partially cut surgically. The bowel has been extensively loosened from its mesenteric attachments. The descending abdominal aorta, kidneys, liver and gallbladder, and adrenal glands are absent.

CARDIOVASCULAR SYSTEM:

The heart weighs 100 grams. The coronary arteries arise normally from their respective sinuses and course normally over the heart. Multiple sections reveal no evidence of disease. The epicardial surface exhibits fine petechial-like hemorrhagic contusions over most of its surface. On section, the myocardium is brown, free of injury or disease. The atrial and ventricular septa are intact. The valve leaflets are delicate, pliable and morphologically normal. The endocardium exhibits patchy subendocardial hemorrhage, but is otherwise unremarkable.

The aorta arises normally with a left arch. No traumatic injury is observed apart from iatrogenic change. The aorta stops at approximately the level of the diaphragm.

RESPIRATORY SYSTEM:

The distal end of the orotracheal tube is below the vocal cords but above the carina. The lungs are expanded, weighing 270 and 240 grams, right and left respectively. There are ovoid hemorrhages on the pleural surfaces of both lungs which correspond to suction ports from the chest tubes. On section, the subcrepitant, edematous and congested parenchyma is free of consolidation and emphysematous change throughout.

The pulmonary arteries are free of obstruction.

ENDOCRINE SYSTEM:

The pituitary gland is surrounded by hemorrhage. The thyroid gland and pancreas are grossly pale but otherwise unremarkable.

DIGESTIVE SYSTEM:

The distal end of the orogastric from the mouth is within the stomach. The nasal tube ends in the esophagus and appears to be an esophageal lead. The esophagus is otherwise empty, lined by a tan unremarkable mucosa. The stomach contains a few cc. of greenish mucus. The gastric mucosa exhibits a few punctate mucosal ulcerations, but is otherwise unremarkable. The duodenum exhibits patchy mucosal hemorrhage, particularly at the crests, but the luminal contents are tan to brown and watery, virtually blood free. An area of surgical repair is observed in the mid to distal jejunum, which repairs a transmural rent in the jejunum surrounded by a small amount of hemorrhage. The rent occupies approximately 1/3 of the circumference of the jejunum. A few patches of mucosal and muscular hemorrhage are observed in other areas of the bowel, and hemorrhage is observed along the outside of the ascending colon, but no other transmural bowel injuries are observed. The appendix is unremarkable.

HEPATOBILIARY SYSTEM:

The liver and gallbladder are absent.

GENITOURINARY SYSTEM:

The kidneys are absent. The bladder contains the distal end of the Foley catheter but no urine. The bladder mucosa is tan and unremarkable. The prostate is tan, rubbery and grossly unremarkable.

Some hemorrhage is observed along both spermatic cords, but the testes are tan, rubbery, and grossly normal for age.

RETICULOENDOTHELIAL SYSTEM: The spleen is absent.

The exposed lymph nodes are pale but not enlarged.

The exposed bone marrow is red-brown and grossly unremarkable.

NECK:

There is extensive hemorrhage observed along the right side of the neck and a smaller amount along the left side of the neck. The hyoid bone is mobile but not fractured. The laryngeal cartilages are intact. The lumen is unobstructed.

MUSCULOSKELETAL SYSTEM:

A few patches of hemorrhage are observed along the diaphragm which has been previously partially cut. The musculature is somewhat pale, but normally developed. No rib fractures are observed and the axial skeleton is otherwise unremarkable.

HEAD AND CENTRAL NERVOUS SYSTEM:

The scalp is reflected and the calvarium removed intact. There is no epidural hemorrhage. The 1510 gram brain is symmetric. Trauma has been described. The brain and spinal cord are fixed in formalin for later sectioning.

Sections through the upper cervical cord demonstrate some focal areas of hyperemia, but no definite softening or necrosis.

The brain exhibits subarachnoid hemorrhage, somewhat more prominent on the left than on the right. The cerebellar tonsils are notched, but not grossly necrotic. The basis pontis is somewhat flattened. The left uncus is more prominent than the right. The gyri are diffusely widened and flattened.

Multiple sections reveal laceration through the corpus callosum which may be an artifact of evisceration. However, there is diffuse blurring of the gray-white interface, and numerous streak hemorrhages are in the cortical white matter of both frontal lobes, parietal lobes, occipital lobes, and in the cerebellar white matter. Streak hemorrhages are also observed in the deep gray matter. There is accentuation of the streak hemorrhages in the cortex of the left lateral parietal lobe, left superior and medial frontal lobe, and inferior frontal lobe. These almost become confluent and have to be considered contusions. The brain stem is flattened, but no discrete hemorrhage is observed.

SAMPLES OBTAINED:

Samples of vitreous fluid and gastric contents are retained.

MICROSCOPIC EXAMINATION:

THYMUS:

Acute involutional change, early.

PANCREAS:

No significant changes.

PITUITARY GLAND:

Acute hemorrhage in surrounding tissue. The gland itself is unremarkable.

LUNGS:

Acute pneumonia.

TESTICLE:

No significant changes.

HEART:

Focally, hemorrhage is observed around superficial blood vessels. No significant myocardial changes are noted.

THYROID GLAND:

No significant changes.

BRAIN:

Marked edema, with focal subarachnoid hemorrhage.

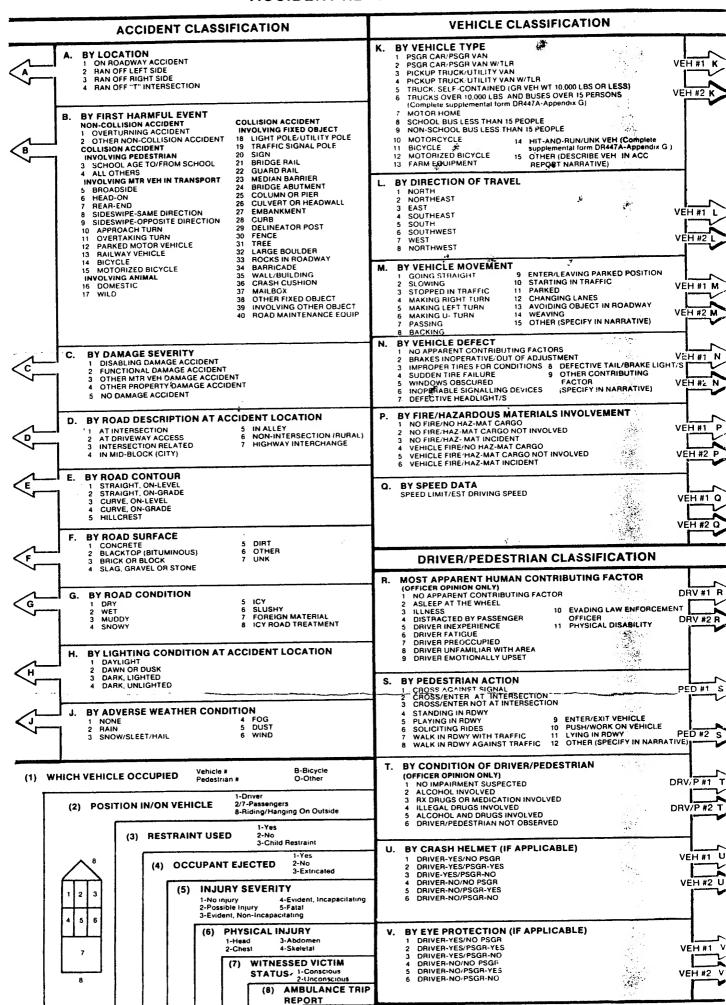
SPINAL CORD:

Acute hemorrhage is observed along the spinal cord, and along vessels of the upper cervical cord.

DSI-95-AB-17

Police Report

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BEST AVAILABLE

MEMORANDUM

DATE:

TO:

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FROM:

SUBJECT:

Fatal accident

On Saturday morning,

Was working a to shift. I was working in the area when communication officer advised me at of a serious injury accident 10 miles east of She also advised troopers and in the same transmission of the accident. I asked again of the location and she said the accident was 10 miles east of

I proceeded to the location of the accident using my emergency equipment. I could hear on my radio that an ambulance had been dispatched and I overheard on my radio that a police car was near the and travelling towards and would be on the scene shortly. As I was entering I heard the say that he was on scene. I arrived on scene at

While pulling up on the scene I observed numerous vehicles parked on both sides of the highway. I observed a blue Plymouth minivan in the eastbound lane facing southeast with its front end on the fog stripe, a man sitting in the drivers seat, a bunch of people sitting and lying on the highway on a blanket near the right sliding door of the van and a lot of people standing around the vehicle. As I proceeded past the van I noticed that this van had extensive damage to the front and top of the vehicle. At this time I observed another vehicle in the south borrow ditch facing northeast approximately 20 ft. off the road. This vehicle also showed extensive damage to the front and left side of the vehicle as well as to the top of the vehicle. This vehicle was a dark gray Buick 4 dr. type vehicle. I drove past the accident scene so that I could turn around after clearing all the vehicles that were parked along sided of the road. At this time was arriving on the scene at the same time and I had to wait for him to pass so that I could turn my car around.

I turned my patrol car around and drove up near the accident and parked my vehicle directly behind from the As I exited my vehicle and started walking towards the van I noticed two tires skids leading from the eastbound lane toward the right shoulder and ending in the right shoulder. The right tire mark ended near the middle of the shoulder and the left tire skid which didn't appear to be as long and running parallel with the right skid ended in front of the van and near the top of the fog stripe on the highway.

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I was met by who told me that there were some serious injuries as to the victims of the van. He also told me that the driver was pinned in the vehicle. I also heard on the radio that the fire dept. from was enroute to assist with extrication. As I approached the van I seen kneelin near a six year old child. He looked up at me and told me that he had twice stopped breathing but that he had been able to revive him using CPR. I checked his breathing at he was breathing on his own. I then stopped to check on an infant who the mother, was holding. The baby was breathing on his own and I told that an ambulance was enroute and would be arriving very shortly. I checked the injuries of two other children and found that their injuries were not as life threatening. I went to the drivers side of the van and the driver told me that his wrists were broken and that he was pinned in the vehicle and unable to get out. I assured him that help was on the way and told him not to move. As I walked around the fron of the van I noticed another man standing with blood on his shirt and around his mouth. I asked If he had been in the accidenand he said yes. I asked him if the other vehicle was his and he said yes. I asked if he had been drinking and he said no. I did not smell any alcohol on him. About this time trooper arrived on the scene. He arrived three minutes after I did. A lot of people were stopping and the area was getting congested so I ordered everyone who was not a witness or assisting with the car of the injured to leave so that we could get the ambulance to the scene.

police officer arrived on the scene and I asked him if he could assist me with traffic on the west side of the accident.

a captain with the . told me that he would assign one of his men to assist with traffic on the east side of the accident. He assigned to handle the traffic. I advised dispatch also that we needed another ambulane. I called about 4 times during a 10 minute time frame and she said that the secondary ambulance was not responding to her calls. a fireman from had stopped to assist at the accident.

The primary ambulance arrived on the scene and I directed it to the injured partithat were lying on the blanket. I talked to and she told me who everyone in the vehicle were and where they were seated. The primary ambulance transported the most serously injured of the children and in the front seat. They were taken to the Immediately upon their arrival there arrangement were made to fly both boys to to Childrens Hospital because of skull fractures

During this time trooper arrived on the scene. Both and asked me what they could do to assist with my investigation. Because everyone else was being attended to I asked if he could start assisting me by marking the vehicle that was blocking the eastbound lane and asked if he could assist me with the diagram on the notebook. I asked to get a camera and told him that I needed pictures of the accident scene and of the vehicles. I told him that I needed a lot of pictures and not to try to restrict all the pictures to one roll of film.

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By this time it was becoming apparent to me that I might not be getting and I still had at least three people that another ambulance from were going to be needing to be transported. I ran to retured to his him if he could call for an ambulance out of and came back and told me that we vehicle and called on his radio to told me that she should have an ambulance in about 10 minutes. needed to get to the hospital to be with her critical injured children and asked me if I would take her. I told her that I couldn't but that I would make to take here. She also had some leg injuries. arrangements with officer Lasked officer , and he transported from the scene to the emergency room.

I had no idea where this investigation would lead but I was realizing that there was a lot more going on at the scene then I had resources to handle and that I might need some more help. I asked to page out an investigator from the district attorneys office to come to the scene and to assist me. I was notified by that was on his way out. I asked to see if she notify because this might be an accident that we would need to reconstruct. Within ten minutes was on scene and shortly afterward was on the scene also.

arrived. Near eight o'clock the ambulance from were in this ambulance. At the same time from and the arrived driving the secondary ambulance from ". By this time had been extricated from the vehicle that he was driving. The decision was made for to transport a fireman on the scene and also an ambulance attendant would ride in the back of the ambulance and provide care to transported the two remaining children, and and to the hospital. With all the injured removed from the scene I was able to continue with the accident investigation.

I checked with the hospital and found that they had done a medical blood screen at the lab in the hospital on and his blood alchol was a 41. Not knowing what scale the hospital used and going over the accident scene with _____ I asked him if he could go to the emergency room and obtain a blood alcohol test from _____ I'm not sure what time this was but I knew it was after 8:00am because I could here a new comminucation officer working and shift change was a 8:00 am.

I got with trooper and we determined where the point of impact was. We determined that the point of impact was 16.3' south of the center line and that impact had taken place in the eastbound shoulder. My investigation showed that the vehicle was eastbound in the eastbound lane and that the veh had skidded 97.7' prior to impact. After impact the vehicle was spun back 5.5' coming to stop facing southeast in the eastbound lane. The vehicle was westbound on rossed into the eastbound lane then the shoulder and struck the vehicle headon. There was no skid prior to impact on the vehicle and the vehicle travelled 43.8' coming to stop in the south borrow ditch. Both vehicles came to stop on their wheels.

At am I talked with

He told me tht he had witnessed the accident. He stated that he was travelling eastbound on at approximately the dairy which is 7 miles east of when he observed the eastbound ven pass him. He stated that he was travelling about 60 mph. He stated that the van continued eastbound and he thought it was speeding. He said it caught up to the car that was in front of him about a half mile. He said it appeared to him that the van had pulled out to pass the next car when it struck the westbound vehicle head-on. I obtained a written statement from him and in this statement he changed his story saying that the car had come over into the eastbound shoulder and struck the van. I believe that after he stood at the scene and looked at the skid he perceived the accident different then he had seen.

arrived on the scene shortly after am I explained to what had occured. assisted him with the measurements for the level 3 investigation. to go to the hospital and assist with the blood tests. After obtaining the measuremen: I had dispatch send me two wreckers. responded and towed the This was a 94 Plymouth Grand Voyger lic.# It was registered to The other vehicle was towed from the scene was taken to This was a . After completing my investigation at the scene I then went to the emergency room .

Upon arriving at the emergency room I was met by trooper He told me that he had the blood alcohol kits with him and I asked him to put them in the mail. He told me that the nurse that was taking care of had told her that he was driving alone in his car and that the other car was passing and had ran into him. He also stated that he had drank 2 beers about after he had gotten off work. The nurses name was

I asked a , if he would assist me in advising of his rights and assist me in questioning him. He was advised of his rights at He stated that he did not wish to talk to me until after he had talked to an attorney.

I talked to while he was lying in the emergency room and just prior to him being airlifted to and he told me that he was travelling east on He said that he seen the vehicle in front of him swerve to the shoulder and next thing he seen was this other vehicle coming towards him. He said he had no time to get out of his way and they met headon. I asked him how fast he was going and he said 60 mph. I asked him if he was passing another vehicle and he said no. While he was being readied to be taken to the roof to be put on the helicopter another helicopter arrived to transport his daughter

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Folt

After leaving the hospital I felft that I had enought information to go to the office and start working on the accident report. I contacted and her performed a mechanical inspection on both vehicles.

was able to take some photographs of the accident scene from the air. At this time I don't have these reports or photographs of the accident however they will be included in the fatal file as soon as we get a copy of the reports and photos.

I was able to talk to and got a statement from She stated that "My husband got takes an hour to get home got home around. off work around When he got home he ate dinner took shower, and showed me the map to where he was going which was to and then to He had one beer to drink with dinner he left I would say around Then he called me around time collect from He told me he had stop to rest awhile and to wash his face with cold water because he was very tired. Did not hear from him no more until the next morning for the that he was in a car wreck". I talked to again about and she told me on the telephone that on Her husband had gone to bed at and slept till He then got up and worked on the car until at which time he had gone to work. He works for and it takes one hour to get to work. I had already told her what had happened at the accident and she said tht her husband had told her that he couln't remember anything prior to being involved in the accident. He could only remember that right after the crash the car spun around and he found himself travelling in the borrow ditch. I advised her that at this point it appeared that the charges against her husband were vehicular homicide, vehicular assault (3 counts), drove a vehicle without valid drivers license, and operated an uninsured motor vehicle on a public roadway. I told her that her husband would be taken to the and would have to post a bond prior to he being allowed to go home.

contacted me and told me that he had obtained a statement from a distant relative of his who had witnessed the accident. The witness was

45

She said

I was driving our red Chevrolet Cavalier to to shop with my two daughters. At around we were headed east on highway approximately 10 miles outside of going about I noticed the car coming west in the other lane start to cross over into my lane. I watched him and $h \epsilon$ continued to come toward me. I swerved off the road to the right shoulder into the dirt abd ge barely missed my car. I looked in my rear view mirror as he hit the minival directly behind me. The oncoming car then went into the ditch. I stopped and backed up and ranto see if I could help the people in the minivan. I went to the driver and told him to unlock his door so I could help. He looked dazed like he was in shock. He said "I can't, both my arms are broken". Then I went to the other side of the van. The lady was leaning over the baby in the car seat frp, behind saying,"I can't get my baby out of the car seat!" The baby looked unconcious. There was a child in the front seat not making any sounds and

and arinivar

there was a child in the back screaming hysterically. The driver did have his seat belt on. The baby was in the car seat. Idid not notice whether the others were in seat belts". She did go on to say "When the accident occured the minivan was following behind me pretty close. I had just remarked about that to my daughters I don't like to be followed close. He did not seem interested in passing me He had followed for quite awhile and just seemed to let me set the pace".

At this point I am waiting for trooper accident investigaion on this accident.

to do a level 4

7

WITNESS LIST

Pg __ of __Pgs

NAME	STATEMENT ()yes ()no
ADDRESS	PHONE: work ome
CAN TESTIFY TO: Investigated the acciden	
and filed paperwork with the dis	trict attorneys office.
	·····
NAME	STATEMENT () yes () no
ADDRESS	PHONE: home
CAN TESTIFY TO: Assisted Technician	on scene with accident. Took pictures o
accident scene and then responed to	to assist with
blood alchol test administered to the driv	ver Assisted on scene
with paperwork, inventory of vehicles, and	d measurements.
NAME	STATEMENT () yes () no
ADDRESS\	PHONE: work home
CAN TESTIFY TO: Assisted Technician	on scene with accident. Took measuremen
on scene and assisted with paperwork at so	ene of accident. Also assisted with the
inventory of vehicles, and assisted	with measurements for level 3
accident investigation.	
	·
NAME	STATEMENT ()yes ()no
ADDRESS	PHONE: work home
	nvestigation. Took measurements and
did damage analysis of vehicles. Assisted	with interviewing witness to accident.

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CASE NUMBER AB17 - IMPACT NO. 1 - FRONT TO FRONT

SPEED CHANGE		TOTAL (KPH)	LONG. (KPH)	LAT.(KPH)	ANG. (DEG)
(DAMAGE)	VEH #1	84.4	-84.1	7.4	-5.0
	VEH #2	90.5	-89.1	-15.7	10.0

ENERGY DISSIPATED BY DAMAGE VEH#1:757405.3 JOULES VEH#2:360010.6 JOULES

SUMMARY OF DAMAGE DATA (* VEHICLE # 1	INDICATES DEFAULT VALUE) VEHICLE # 2
TYPECATEGORY 5 STIFFNESSCATEGORY 7 WEIGHT 1841.2 KGS CDC12FZEW7 L 158.0 CM. C1 45.7 CM. C3 86.4 CM. C4 106.7 CM. C5 132.1 CM. C6 137.2 CM. D 20.6 CM. RHO	TYPECATEGORY 4 STIFFNESSCATEGORY 4 WEIGHT 1717.3 KGS CDC12FDEW6 L 177.8 CM. C1 55.9 CM. C2 48.3 CM. C3 76.2 CM. C4 101.6 CM. C5 144.8 CM. C6 170.2 CM. D 21.6 CM. RHO 1.00 * ANG 10.0 DEG. D' 42.3 CM.
DIMENSIONS AND INE	RTIAL PROPERTIES
A1 = 142.5 CM. B1 = 160.0 CM. TR1 = 161.8 CM. I1 = 481714.4 NEWT-SEC**2-CM M1 = 18.482 NEWT-SEC**2/CM XF1 = 258.6 CM. XR1 = -309.6 CM. YS1 = 101.3 CM.	A2 = 138.9 CM. B2 = 150.4 CM. TR2 = 157.0 CM. I2 = 416061.5 NEWT-SEC**2-CM M2 = 17.239 NEWT-SEC**2/CM XF2 = 251.0 CM. XR2 = -289.6 CM. YS2 = 97.8 CM.

CASE NUMBER AB17 - IMPACT NO. 1 - FRONT TO FRONT

SPEED CHANGE		TOTAL (MPH)	LONG. (MPH)	LAT. (MPH)	ANG. (DEG)
(DAMAGE)	VEH #1	52.5	-52.3	4.6	-5.0
	VEH #2	56.2	-55.4	-9.8	10.0

ENERGY DISSIPATED BY DAMAGE VEH#1:558558.5 FT-LB. VEH#2:265494.6 FT-LB.

SUMMARY OF DAMAGE DATA (* VEHICLE # 1	INDICATES DEFAULT VALUE) VEHICLE # 2
TYPECATEGORY 5 STIFFNESSCATEGORY 7 WEIGHT	TYPECATEGORY 4 STIFFNESSCATEGORY 4 WEIGHT 3786.0 LBS. CDC12FDEW6 L 70.0 IN. C1 22.0 IN. C2 19.0 IN. C3 30.0 IN. C4 40.0 IN. C5 57.0 IN. C6 67.0 IN. D 8.5 IN. RHO 1.00 * ANG 10.0 DEG. D' 16.6 IN.
DIMENSIONS AND INE	RTIAL PROPERTIES
A1 = 56.1 IN. B1 = 63.0 IN. TR1 = 63.7 IN. I1 = 42637.4 LB-SEC**2-IN M1 = 10.554 LB-SEC**2/IN XF1 = 101.8 IN. XR1 = -121.9 IN. YS1 = 39.9 IN.	A2 = 54.7 IN. B2 = 59.2 IN. TR2 = 61.8 IN. I2 = 36826.4 LB-SEC**2-IN M2 = 9.844 LB-SEC**2/IN XF2 = 98.8 IN. XR2 = -114.0 IN. YS2 = 38.5 IN.

CASE NO. AB17 - VEHICLE 1 V. FIXED OBJECT

SPEED CHANGE		TOTAL (MPH)	LONG. (MPH)	LAT. (MPH)	ANG. (DEG)
(DAMAGE)	VEH #1	60.3	-60.1	5.3	-5.0
	VEH #2	.0	.0	.0	.0

ENERGY DISSIPATED BY DAMAGE VEH#1:558558.5 FT-LB. VEH#2: .0 FT-LB.

```
(* INDICATES DEFAULT VALUE)
SUMMARY OF DAMAGE DATA
          VEHICLE # 1
                                         VEHICLE # 2
TYPE-----CATEGORY 5
STIFFNESS---CATEGORY 7
                                       TYPE-----CATEGORY 11
                                       STIFFNESS---CATEGORY 0
                                      WEIGHT-----BARRIER
L------ 0 IN.
WEIGHT----- 4059.0 LBS.
CDC-----12FZEW7
L----- 62.2 IN.
C1-----
                                       C1----
                                                      .0 IN.
              9.0 IN.
                                       C2----
C2-----
              18.0 IN.
                                                      .0 IN.
C3----- 34.0 IN.
                                       С3----
            42.0 IN.
52.0 IN.
C4-----
                                       C4-----
                                                      .0 IN.
                                                      .0 IN.
C5-----
                                       C5----
                                       C6-----
C6----
            54.0 IN.
                                                      .0 IN.
D------
RHO-----
                                       D-----
               8.1 IN.
                                                       .0 IN.
                                       RHO-----
              1.00
                                                     1.00
                                                     .0 DEG.
ANG-----
              -5.0 DEG.
                                       ANG-----
                                       D'----
D'----
             15.4 IN.
                                                      .0 IN.
                   DIMENSIONS AND INERTIAL PROPERTIES
```

A1	==	56.1	IN.	A 2	=	50.0	IN.
B1	=	63.0	IN.	B2	=	50.0	IN.
TR1	#	63.7	IN.	TR2	=	50.0	IN.
I1	=	42637	.4 LB-SEC**2-IN	12	=26	00104000	.O LB-SEC**2-IN
M1	=	10.554	LB-SEC**2/IN	M2	=26	00.104	LB-SEC**2/IN
XF1	=	101.8	IN.	XF2	=	50.0	IN.
XR1	=	-121.9	IN.	XR2	122	-50.0	IN.
YS1	*	39.9	IN.	YS2	==	50.0	IN.

CASE NO. AB17 - VEHICLE 1 V. FIXED OBJECT

SPEED CHANGE		TOTAL (KPH)	LONG. (KPH)	LAT. (KPH)	ANG. (DEG)
(DAMAGE)	VEH #1	97.0	-96.7	8.5	-5.0
	VEH #2	.0	.0	.0	.0

ENERGY DISSIPATED BY DAMAGE VEH#1:757405.3 JOULES VEH#2: .0 JOULES

SUMMARY OF DAMAGE DATA	(·	* INDICATES DEFAULT VA	LUE)	
VEHICLE # 1		VEHICLE # 2		
TYPECATEGORY 5		TYPECATE		
WEIGHT 1841.2 K		WEIGHT 453		*
CDC12FZEW7		CDCBARR		
L 158.0 CM	1.	L		*
C1 22.9 CM		C1		*
C2 45.7 CM		C2		*
C3 86.4 CM	ſ .	C3		*
C4 106.7 CM	1.	C4	.0 CM.	*
C5 132.1 CM	ſ.	C5		*
C6 137.2 CM	ſ .	C6	.0 CM.	*
D 20.6 CM	í.	D	.0 CM.	*
RHO 1.00	*	RHO	1.00	*
ANG5.0 DE	G.	ANG	.0 DEG.	*
D' 39.0 CM	1.	D'	.0 CM.	
	IMENSIONS AND I	NERTIAL PROPERTIES		

A1	=	142.5 CM.	A 2	=	127.0	CM.
B1	=	160.0 CM.	B2	=	127.0	CM.
TR1	=	161.8 CM.	TR2	=	127.0	CM.
Il	=	481714.4 NEWT-SEC**2-CM	I2	=*	*****	** NEWT-SEC**2-CM
M1	=	18.482 NEWT-SEC**2/CM	M2	=4	553.302	NEWT-SEC**2/CM
XF1	=	258.6 CM.	XF2	=	127.0	CM.
XR1	=	-309.6 CM.	XR2	=	-127.0	CM.
YS1	=	101.3 CM.	Y 52	_	127 0	CM

CASE NUMBER AB17 - VEHICLE 2 V. FIXED OBJECT

SPEED CHANGE		TOTAL (KPH)	LONG. (KPH)	LAT. (KPH)	ANG. (DEG)
(DAMAGE)	VEH #1	73.3	-72.2	-12.7	10.0
	VEH #2	.0	.0	.0	.0

ENERGY DISSIPATED BY DAMAGE VEH#1:360010.6 JOULES VEH#2: .0 JOULES

SUMMARY OF DAMAGE DA	ATA	(* INDICATES DEFAULT V	ALUE)	
VEHICLE		VEHICLE # 2	,	
TYPECATEGORY	4	TYPECAT	EGORY 11	
STIFFNESSCATEGORY	. 4	STIFFNESSCAT	'EGORY 0	
WEIGHT 1717.	3 KGS	WEIGHT 45	3600.0 KGS	,
CDC12FDEW6		CDCBAR	RIER	
L 177.8	CM.	L	.0 CM.	*
C1 55.9	CM.	C1		*
C2 48.3	CM.	C2	.0 CM.	*
C3 76.2	CM.	C3		*
C4 101.6	CM.	C4		*
C5 144.8		C5		*
C6 170.2		C6	.0 CM.	*
D 21.6	5 CM.	D		*
RHO 1.00	*	RHO		*
ANG 10.0	DEG.	ANG		*
D' 42.3		D'		
	DIMENSIONS AND	THEORETT DOODCOMICS		

DIMENSIONS AND INERTIAL PROPERTIES

A1	=	138.9 CM.	A2	=	127.0	CM.
B1	=	150.4 CM.	B2	=	127.0	CM.
TR1	=	157.0 CM.	TR2	=	127.0	CM.
I1	==	416061.5 NEWT-SEC**2-CM	12	* **	******	** NEWT-SEC**2-CM
Ml	=	17.239 NEWT-SEC**2/CM	M2	=45	53.302	NEWT-SEC**2/CM
XF1	=	251.0 CM.	XF2	=	127.0	CM.
XR1	=	-289.6 CM.	XR2	=	-127.0	CM.
YS1	=	97 8 CM	VC2		127 0	CM

CASE NUMBER AB17 - VEHICLE 2 V. FIXED OBJECT

SPEED CHANGE			TOTAL (MPH)	LONG. (MPH)	LAT. (MPH)	ANG. (DEG)
(DAMAGE)	VEH	#1	45.6	-44.9	-7.9	10.0
	VEH	#2	.0	.0	.0	0
						•

ENERGY DISSIPATED BY DAMAGE VEH#1:265494.6 FT-LB. VEH#2: .0 FT-LB.

```
SUMMARY OF DAMAGE DATA
                             (* INDICATES DEFAULT VALUE)
         VEHICLE # 1
                                       VEHICLE # 2
TYPE------CATEGORY 4
                                    TYPE----CATEGORY 11
STIFFNESS---CATEGORY 4
                                    STIFFNESS---CATEGORY 0
WEIGHT----- 3786.0 LBS.
                                    WEIGHT-----1000000.0 LBS.
CDC----12FDEW6
                                    CDC-----BARRIER
L-----
                                    L-----
             70.0 IN.
                                                   .0 IN.
C1-----
            22.0 IN.
                                    C1-----
                                                   .0 IN.
C2-----
           19.0 IN.
30.0 IN.
                                    C2----
                                                   .0 IN.
C3-----
                                    C3-----
                                                   .0 IN.
                                    C4-----
C4-----
            40.0 IN.
                                                   .0 IN.
C5-----
                                    C5-----
            57.0 IN.
                                                   .0 IN.
C6----
                                    C6----
             67.0 IN.
                                                   .0 IN.
D-----
                                    D-----
             8.5 IN.
                                                   .0 IN.
RHO-----
             1.00
                                    RHO-----
                                                 1.00
ANG-----
             10.0 DEG.
                                    ANG-----
                                                   .0 DEG.
D'----
             16.6 IN.
                                    D'-----
                                                   .0 IN.
                  DIMENSIONS AND INERTIAL PROPERTIES
A1
        54.7
               IN.
                                  A2
                                            50.0
                                                  IN.
B1
```

WITNESS LIST

Pg 3 of Pgs

NAME	STATEMENT (k) yes () no
ADDRESS	PHONE: work home
CAN TESTIFY TO:	Witness to accident. She was travelling eastbound on
when whe observed	a westbound vehicle travel into the eastbound lane. She pulled off
to the right shou	lder to avoid being hit. She immediately stopped after the accident
occured behind he	r and rendered assistance until emergency help arrived.
NAME	STATEMENT ()yes ()no
ADDRES	PHONE: work home
CAN TESTIFY TO:	Performed the analysis of the blood sample from
at the	
<u> </u>	\7
NAME	STATEMENT () yes () no
ADDRESS	PHONE: work home
CAN TESTIFY TO:	On first ambulance on scene. Performed emergency medical treatment
on the most serous	sly injured at the scene and transported to regional
NAME	STATEMENT () yes () no
ADDRESS:	PHONE: wor nome
CAN TESTIFY TO:	On first ambulance on scene. Performed emergency medical treatment
on the most serous	ly injured at the scene and transported to

Page _____

WITNESS LIST

Case # ____

Pg 4 of Pgs

NAME	STATEMENT ()yes ()no
ADDRESS	PHONE: work home
CAN TESTIFY TO:	Responed to the scene as a fireman. I asked him to go to the
hospital and as	sist me with interrogating the driver,
	him of his rights in spanish. After being advised of his rights
the driver stat	ed that he did not wish to talk to anyone until after he had talked
to an attorney.	He assisted with getting the correct name and dob of the driver.
NAME	STATEMENT (K) yes () no
ADDRESS	PHONE: work
CAN TESTIFY TO:	She was an who was called to the emergency room to assist
the accident vi	ctims. She treated the driver, Smelled odor of
alcohol on drive	er. Driver told her that he was driving and that he had two beers to
drink at	when he got off work.
and the second s	
NAME _	STATEMENT () yes () no
ADDRESS 7	PHONE:
CAN TESTIFY TO:	Can testify that he was driving eastbound on following
another vehicle	when he seen the vehicle in front of him sereve and then he seen
a vehicle coming	g towards him in his lane of traffic. He slammed on his brakes but was
unable to avoid	a head on collision.
NAME	STATEMENT ()yes ()no
ADDRESS	PHONE: work home
	That she was riding in the back seat of a van that her husband was
	heard her husband scream and she seen a vehicle coming towards her
in the lane they	were driving. She can testify as to where everyone that was riding
<u>in her vehicle w</u>	ere seated.
in her vehicle w	ere seated.

Page ____

Page

Case #

WITNESS LIST

 $Pg = \frac{5}{2} of Pgs$

NAME	STATEMEN	T ()yes ()no
ADDRESS	PHONE: work	home
CAN TESTIFY TO: That he was working	g in the emergency room of the	
Regional Medical Center the day of th	ne accident and he attended to	
NAME	STATEMENT	Hyes ()no
ADDRESS (A)C	PHONE: worl	nome
CAN TESTIFY TO: Was working in the	emergency room of the	Regional
Medical Center the day of the acciden	t and treated and	
NAME	STATEMENT	()yes ()no
ADDRESS	PHONE: work	ome
CAN TESTIFY TO: Was working in the	emergency room of the	Regional
Medical Center the day of the acciden	t and treated and	
NAME	STATEMENT	()yes ()no
ADDRESS	PHONE: wor.	home
CAN TESTIFY TO: Was working in the	emergency room of the	Regional
Medical Center the day of the acciden	t and treated victims of the acci	ident.
·		

Case #

WITNESS LIST

Pg 6 of Pgs

NAME	-			STATEMENT	()yes ()n
			PHONE:	work	pme
CAN TESTIFY TO:Took pictures	of vehicle	at storag	ge lot.		
NAME				CMA MEMEATA	/ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
NAME				•	
ADDRESS				work	home
CAN TESTIFY TO:					
		-			
	,				
NAME	· · · · · · · · · · · · · · · · · · ·			_ STATEMENT	() yes () no
ADDRESS"		~	PHONE:	work	home
CAN TESTIFY TO:					
			·		
				1	
NAME				STATEMENT	()yes ()no
ADDRESS .			PHONE:	work	home
CAN TESTIFY TO:					**************************************
(
			~		
					()

5/

Page ____

MEASUREMENTS FOR SCALE DIAGRAM

case No.			
Officers:			-
Date of Accident	Location		
Date of Measurements	Type of Measurements		
Reference Point(s)	of	X	Coordinate

	POINT	POINT	(N-S)	(E-W)
1 -	Veh #2 Rt Side End Skid		5.2'N	409.9'E
2.	Veh #2 Rt. side start ski		10.4'N	322.3'E
3	Veh #2 Lft side end skid		10,5'N	410'E
4	Veh #2 Lft side start ski		15.5'N	325.5'E
5	Veh #2 Lft rear wheel @ re	est	15.8'N	404.8'E
6.	Veh #2 Rt rear wheel @ re	;t	13.1'N	400.6'E
	Veh #1 gouges near POC/ma	eng	6.6'N	413'E
8.	Veh # 1 start sked (under	carriage)	2.8'S	409.5'E
9.	Veh #1 end skid (under ca	riage)	28'S	376.4'E
10.	Veh #1 Rt front wheel @ r	est	21.6'S	377.7'E
11	Veh #1 Lft front wheel @	rest	22.1'S	371.7'E
12	Veh #1 total sked after c	ontact	42'	
13.	Veh #2 Rt side all wheel	skid	86.5'	
14 _	Veh #2 Lft side all wheel	skid	84.61	
-	Est POC		6.6'N	412'E
-				
-				
_				
_				

MEASUREMENTS FOR SCALE DIAGRAM

Case No.		
Officers:		
Date of Accident	Location	
Date of Measurements Same	Type of Measurements	Triangulatio
Reference Point(s) South east Con	S	¥_ Coordinate

	POINT	POIŅT	(N-S)	(E-W)
1	Ueh#2 Rt Side FAC	SKID	S.2' H	409.9'E
2	Ucht By Side Sint	SIID	104 N	322.3 E
3	Ueht 2 LFT Side F. MO	SKTD	10.5'N	410'E
	Ud, #2 LA Side Stant	SKTO	15'5' M	325.5'E
5	Uch#2 Lft Rew	What @ Rost	15.8°N	404.8'E
6	Ud. #2 Rt Reir	Whele Rest	13.1 11	400.6' E
7	Uph#1 Gours Mean	PCC/MAY EAC.	6.6'N	413' E
8	Uch 1 Start Skill	(under chrique)	2.8'5	1/095 F
9	Val. 1 FID SITO	(under reading)	28' S	376.4'E
10	Uch # RT FRONT	WHEEL @ Rest	21.6'5	37).7F
1)	Uch I LFT FAONT	WHEF @ GEST	22.1'5	371.7'E
12	UPHT I DIAL SIND	AFTER CONTACT	. 42'	
1.3	Ush#2 RT SEt all		86.51	
14	Ush#2 LFT Side all	wheel Skiel	81.6'	
-				
_	F.ST Pac		6.6'N	412'E
_				
				·
_				
_				
==				

AAAAAAAAAAAAAAAAAAAAAAA

	INCOMPLETE
ALVAGE? #1 #2	SUPP REPT FILED (DATE) UNDER \$1000
OAD CODE TMILE	
ATFLOF ACCIDENT_ T	IME DAY OF WEEK
ITY —	COUNTY
ATE NOTIFIED OF ACCU	
DATE ARRIVED ON SCEN	E TIME OF TOOL
DATE OF REPORT # K	O # INJURED 7
LOCATION: ROUTE, STREET, ROA	ND
·	% MILES NS
	FEET E W
	AT INTERSECTION WITH
	AT INTERSECTION WITH
OF ROUTE, STREET	
OTHER LOCATION	, ROAD, MILEPOST
OTHER LOCATION PUB. PROP. TOTAL	, ROAD, MILEPOST
OTHER LOCATION PUB. PROP. TOTAL	YEHICLES DISTRICT # PHOTOS TAI
PUB. PROP. TOTAL RAIL. CROSS. CON	YEHICLES DISTRICT # PHOTOS TAI

1

VEH. #1 OR	PARKED	UNA	TTENDED	PE	DESTRIA	AN #
LAST NAME	ā			FIRS	Τ_	
STREET AD	DRESS		'		.tes.	PHONE
CITY				•	···-	
DRIVER LIC.	. NO.			3EX	DATE	OF BIRTH
Non	105			M	1	_
	SUSPENDED I	DENIED	DATE		AGE	WGT HG
	REVOKED E	EXPIRED			25	5-6/6
VIOLATION(S)				HAIF	EYES BON
VICLATIO	N CODE(S)	CITATI	ON NUME	BER(S)	СОММО	N CODE
YEAR MAH	KE _↑	l	MODE		l	
YEAR MAI	But		1/2	s 5	A 132	/
LIC PLATE	STATE	BOD	Y TYPE	COLO	R (TOP	BOTTOM)
		- (100			
VEH IDENTI	FICATION NI	IMBEP	12/0	G.	<u> </u>	
	FICATION NU		7970	<u></u>	<u> </u>	M.I.
	FICATION NU		, , , , , , , , , , , , , , , , , , , 	<u></u>	<u> </u>	M.I.
VEH OWNER	•		CIT		STATE	
VEH OWNER	R LAST NÁME		CIT		•	
VEH OWNER	R LAST NÁME		CIT		•	
	R LAST NÁME			Y	STATE	ZIP
VEH OWNER ADDRESS INS COMPA	R LAST NÁME				STATE	
ADDRESS	R LAST NÁME			Y	STATE	ZIP 8 19 9
ADDRESS INS COMPAI POLICY #	R LAST NÁME			Y	STATE	8 19 9 10
ADDRESS INS COMPAI POLICY #	R LAST NAME THE C		37.49	Y :5 2:	STATE	8 19 9 10
ADDRESS INS COMPAI POLICY # EXP. DATE DAMAGE 1	NY O TRAILER		3 7 4 5 15 15 15 15 15 15 15 15 15 15 15 15 1	Y :5 2:	STATE	8 19 9 10
DAMAGE 1	NY O TRAILER) BY/TO	3 7 4 7 7 15 15 15 15 20 Under	Y :5 2:	STATE	8 19 9 10
DAMAGE 1	NY NO TRAILER) BY/TO	3 7 4 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	18 114 carriage	STATE	8 19 9 10

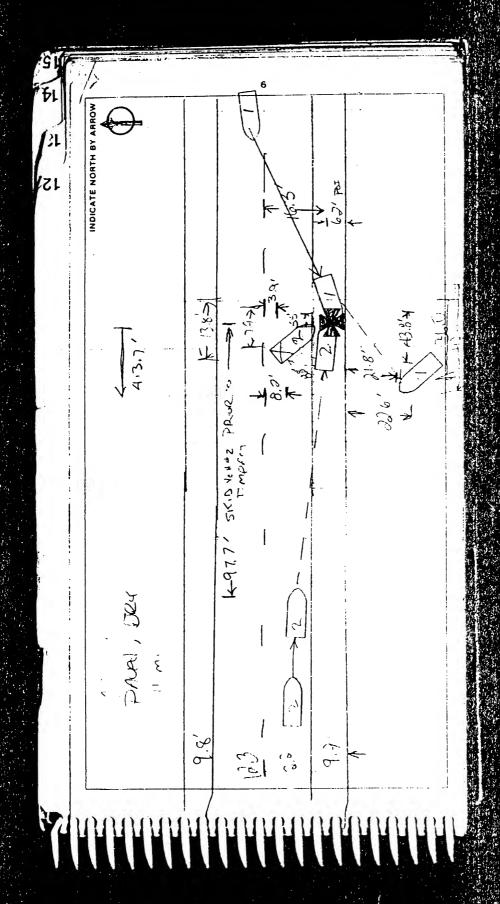
PARAMANANANA PARAMANANA

eldddddddddddddd VEH. #2 OR ___ PARKED ___ UNATTENDED ___ PEDESTRIAN # _ FIRST RES. PHONE STREE | AUUNESS STATE ZIP CODE BUS. PHONE CITX STAME | SEX DRIVER LIC. NO. D.L. CERSS SUSPENDED DENIED REVOKED VIOLATION(S) VIOLATION CODE(S) CITATION NUMBER(S) COMMON CODE(S) MODEL YEAR MAKE GRAND COLOR (TOP / BOTTOM) STATE | BODY TYPE VEH IDENTIFICATION NUMBER VEH OWNER LAST NAME A STATE ADDRESS INS COMPANY POLICY # EXP. DATE DAMAGE TO TRAILER 20 Undercarriage TOWED BY/TO OWNER OF DAMAGED PHOPERTY STATE ADDRESS OWNER PHONE # PROPERTY DESCRIPTION

ACCIDENT CLASSIFICATION A. BY LOCATION ON ROADWAY ACCIDENT HAN OFF LEFT SIDE HAN OFF RIGHT SIDE RAN OLD "I" INTERSECTION B. BY FIRST HARMFUL EVENT COLLISION ACCIDENT NON-COLLISION ACCIDENT INVOLVING FIXED CBJECT 18 LIGHT POLE/UTILITY POLE OVERTURNING ACCIDENT OTHER NON-COLLISION TRAFFIC SIGNAL POLE ACCIDENT 20 SIGN 21 BRIDGE RAIL COLLISION ACCIDENT INVOLVING PEDESTRIAN GUARD RAIL MEDIAN BARRIER 3 SCHOOL AGE TO FROM SCHOOL ALL OTHERS BRIDGE ABUTMENT INVOLVING MTR VEH COLUMN OR PIER CULVERT OR HEADWALL IN TRANSPORT BROADSIDE EMBANKMENT HEAD ON 28 CURB REAR-END 29 DELINEATOR POST SIDESWIPE-SAME DIRECTION SIDESWIPE-OPPOSITE DIRECTION 30 FENCE 31 TREE LARGE BOULDER 10 APPROACH TURN 33 ROCKS IN ROADWAY 34 BARRICADE 11 OVERTAKING TURN 12 PARKED MOTOR VEHICLE WALL/BUILDING 12 RAILWAY VEHICLE 36 CRASH CUSHION MAIL BOX 15 MOTORIZED BICYCLE OTHER FIXED OBJECT INVOLVING ANIMAL 39 INVOLVING OTHER OBJECT 16 DOMESTIC 40 ROAD MAINTENANCE EQUIP 17 WILD C. BY DAMAGE SEVERITY 1 DISABLING DAMAGE ACCIDENT 2 FUNCTIONAL DAMAGE ACCIDENT 3 OTHER MTR VEH DAMAGE ACCIDENT OTHER PROPERTY DAMAGE ACCIDENT NO DAMAGE ACCIDENT D. BY ROAD DESCRIPTION AT ACCIDENT LOCATION AT INTERSECTION AT DRIVEWAY ACCESS 5 IN ALLEY 6 NON-INTE 6 NON-INTERSECTION (RURAL) INTERSECTION RELATED HIGHWAY INTERCHANGE IN MID-BLOCK (CITY) E. BY ROAD CONTOUR 1 STRAIGHT, ON-LEVEL 2 STRAIGHT, ON-GRADE CURVE, ON-GRADE HILLCREST CURVE, ON-LEVEL F. BY ROAD SURFACE 1 CONCRETE DIRT 12 OTHER BLACKTOP (B:TUMINOUS) BRICK OR BLOCK SLAG, GRAVEL OR STONE G. BY ROAD CONDITION DRY WET SLUSHY FOREIGN MATERIAL MUDDY ICY ROAD TREATMENT SNOWY H. BY LIGHTING CONDITION AT ACCIDENT LOCATION 3 DARK, LIGHTED 4 DARK, UNLIGHTED DAWN OR DUSK BY ADVERSE WEATHER CONDITION FOG NON SNOW/SLEET/HAIL



VEHICLE CLASSIFICATION	ON
K. BY VEHICLE TYPE 1 PSGR CAR/PSGR VAN 2 PSGR CAR/PSGR VAN WITTER 3 PICKUP TRUCK/UTILITY VAN 4 PICKUP TRUCK/UTILITY VAN WITTER 5 TRUCK SELF-CONTAINED (GR VEH WT 10,000 LES OR LESS) 6 TRUCKS OVER 10,000 LBS AND BUSES OVER 15 PERSONS (Complete supplemental form DR557A-Appendix G) 7 MOTOR HOME 8 SCHOOL BUS LESS THAN 15 PEOPLE 10 MOTORCYCLE 11 BICYCLE 12 MOTORIZED BICYCLE 13 FARM EOUIPMENT 14 HIT-AND-RUN/UNK VEH (Complete supplemental form DR447A-Appendix G) 15 OTHER (DESCRIBE VEH IN ACC REPORT NARRATIVE)	K. #1 /
L. BY DIRECTION OF TRAVEL 1 NORTH 5 SOUTH 2 NORTHEAST 6 SOUTHWEST 3 EAST 7 WEST 4 SOUTHEAST 8 NORTHWEST	L. #1 7
M. BY VEHICLE MOVEMENT GOING STRAIGHT SLOWING STOPPED IN TRAFFIC MAKING RIGHT TURN MAKING LEFT TURN MAKING U-TURN	#1 /
I. BY VEHICLE DEFECT 1 NO APPARENT CONTRIBUTING FACTORS 2 BRAKES INOPERATIVE/OUT OF ADJUSTMENT 3 IMPROPER TIRES FOR CONDITIONS 4 SUDDEN TIRE FAILURE 5 WINDOWS OBSCURED 6 INOPERABLE SIGNALLING DEVICES 7 DEFECTIVE HEADLIGHT/S 8 DEFECTIVE TAIL/BRAKE LIGHT/S 9 OTHER CONTRIBUTING FACTOR (SPECIFY IN NARRATIVE)	N. #1 7
BY FIRE/HAZARDOUS MATERIALS INVOLVEMEN 1 NO FIRE/NO HAZ-MAT CARGO 2 NO FIRE/HAZ-MAT CARGO NOT INVOLVED 3 NO FIRE/HAZ-MAT INCIDENT 4 VEHICLE FIRE/NO HAZ MAT CARGO 5 VEHICLE FIRE/HAZ-MAT CARGO NOT INVOLVED 6 VEHICLE FIRE/HAZ-MAT INCIDENT	P. #1 //
BY SPEED DATA SPEED LIMIT/EST DRIVING SPEED	0. #1 \$5/50



ACCIDENT DESCRIPTION VEH #1 WAS West Borns as Witer Votresa Chosses INTO EAST ENTINO LANE & STRUCK VEHICLE # 2 IN EXTERONO SHOWLOW DEHILL THEN TRAVELLOS 43.8' TO STOP ON ITS WHEETS IN SOUTH BACK S.S' AFTEX MIDDET Comus TO STOP ON 175 WHEEKS IN EASTROWN CANE e elig

11

WITNESS STATEMENT

e following statement of my own free will with o induce me to make this statement: ress: Name: Madress: Market Cherrolet Catra puice 2 c) my dan Mayurd 7 : 00 pm.	Phone: Home. Lico to the second against	
e following statement of my own free will with a induce me to make this statement: ress: Name: Maddress: Manue: M	Phone: Home. Lico to the second against	me and no promises made
ress:_ Name:_ Address: Dame	Phone: Home.	
ress:_ Name:_ Address: Dame	Coo to the sheet	siness: <u>Same</u>
Name:_ Address: Dame moning Red Cheurolit Catra p wion 2 0 my jan	epters. we were heade	was diming
moning Red Cheurolet Carra prior 2 of my san	epters. we were heade	was dimin
Red Cheurolet Catra p win 2 of my jan	epters. we were heade	was dimin
prion 2 of my day	epters. we were heade	was dimin
prion 2 of my day	epters. we were heade	$\underline{t_i}$
	we were head	· .
MIMINA 70: 118 bon O		
- u-winder - uv Frn.	in 1D miles	d East on
nevais approximat	up 10 mus o	utsule of
, going about	DMPH. Ind	ticed the
a combig west in the	e other lane I	tart no cros
into my lane. I	watched him	and he
tirued to come hown	d me il sue	med of the
i onio the right sho	eder into the	list and he
ily missed my car.	I looked in s	ne rear vier
valor as by hit The	mini van dir	ertly behing
The oncoming can to		// .
of stopped and backe		·
	, hat	west to the
ver and Told him to		1 so I came
		1 de de conse
o be looked aanex	like he wasin	per shock.
said, il cant, with	of my ama a	re broken.
I'l went to the other	state of the war	n. The
y was leaving our to	e byou in the	can seat
be las seat "" In to	by looked in	pabyout
ue was a chied in the	e front seat	not making
** *	L	U
	Signature:	
		/

Any sound and a	there was a child in the back
screaming husteri	cally the driver did have
The seat but on.	The body was in a car sent of
did not notice in	hether the others were in
just didn't notic	e.
Peagle mure ste	apping and coming to help. The
man in the repres	cle following the nuni van
come up to the v	an about the same time ildie.
	dy in the mine wan that il
would go eall an	ambulance, I divide East to
The rearest home	and called for an ambulance.
I saw a highway	+ patral of police can going
lowards the acci	and called for an ambulance. * patrol of police can going dent's with its light and
sun on and uner	w there were many care stapped
so after tacking to	my daughters we decided to
go on to	<i>O</i>
when the acci	ident occurred the mine wan
was following le	whind me protty class. I had
just remarked as	bout that to my daughter. Il
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sum interested in	and just sumed to let me
for quite awhile	and just sumed to let me
Det the pace.	<u> </u>
lalled	our friend on
monday to see he	thought I should tack to
someone or fill or	ut a witness form. The
brought this your	over for me to fill out.
	0 0
Date.	Signatur
Juio,	oignatur

Witness.

Time:

WITNESS STATEMENT

opper:	UCR/Case #:
Defendant:	Date of Incident:
Location:	County:
I make the following statement of my own implied to induce me to make this stateme	free will with no force or threats used against me and no promises made or int:
Name	Phone:
Home Address	· · · · · ·
Business Name:	
Business Address	
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GETTING CAN RETORY

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Signal W

SALI	EN VEHICLE IS SOLD, TITLE HOLDER MUST ASSIGN AND FURNISH THIS TITLE, CURRENT ES TAX AFFIDAVIT TO THE PURCHASER WHO MUST FILE APPLICATION WITH COUNTY TAX	LICENSE RECEIPT, AND X ASSESSOR-COLLECTOR
>	FEDERAL AND STATE LAW REQUIRES THAT YOU STATE THE MILEAGE IN CONNECTION OWNERSHIP. FAILURE TO COMPLETE OR PROVIDING A FALSE STATEMENT MAY RESULT IN FINE	WITH THE TRANSFER OF S AND/OR IMPRISONMENT.
5	The undersigned hereby contilies that the vehicle described in this title is tree and clear of all liens, except as noted herein, and has been transferred to the	e following printed name and address:
ASSIGNMENT OF TITLE	I certify to the best of my knowledge that the odometer reading is the actual mileage of the vehicle unless one of the fo 1. The mileage stated is in excess of its mechanical limits. OCCMETER READING INCTIONS 2. The odometer reading is not the actual mileage, WARNING Sale	
	I am aware of the above odometer certification made by the seller/agent.	
	Signature of Buyer/Agent The understand heads a self-self-self-self-self-self-self-self-	
FIRST REASSIGNMENT BEALER ONLY	The undersigned hereby certifies that the vehicle described in this title is free and clear of all liens, except as noted herein, and has been transferred to the Name of Purchaser Street City	<u> </u>
Z Z	I certify to the best of my knowledge that the odemeter reading is the actual mileage of the vehicle unless one of the following the control of the control	State Zp Owing statements is checked:
SIGN	1. The mileage stated is in excess of its mechanical limits	
EAS! Len	COOMETER RE-DONG PROTORNAL 2. The odometer reading is not the actual mileage. WARNING-	ODOMETER DISCREPANCY.
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EA	Desiry Herre	
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ᇤ	I am aware of the above adometer tertaconor made by the seller/agent.	stonetire)[
		7.00
	Signships of Buyer/Agang Printed Name (sanguas	pigneture)
REASSIGNMENT	The undersigned hereby certifies that the velicite described in this title is tree and clear of all lifes, except as noted herein, and has been transferred to the	following printed name and address:
٤٠	Name of Purchaser City I certify to the best of my knowledge that the odometer reading is the actual mileage of the vehicle unless one of the folk	State / Zip
SSIGN	1. The mileage stated is in excess of its mechanical limits.	owing statements is checked:
Sign	COOMETER READING (No Tentral)	DOMETER DISCREPANCY.
河田	Cate of Sale	Dealer
	Desier's Name	
	Agent's Signature	
SECOND DE/	I am aware of the above odometer certification made by the seller/agent.	signature)
	Signature of Buyer/Agent Printed Name (same as	signature)
SIGNMENT	The undersigned hereby certifies that the vehicle described in this title is free and clear of all liens, except as noted herein, and has been transferred to the	ollowing printed name and address:
≅≻∣	Name of Purchaser Street Cay	State Zo
ON P	I certify to the best of my knowledge that the odometer reading is the actual mileage of the vehicle unless one of the folio	wing statements is checked:
· ^ I	1. The mileage stated is in excess of its mechanical limits. 2. The odometer reading is not the actual mileage WARNING-Company of the actual mileage warming of the actual mileage.	DOMETER DISCREPANCY
EX	Cate of Sale	Dealer
품制	ij Deaer's Name	No
ᆲ	<u></u>	
HIND REAS	Agent's Signature Printed Name (same as a managed of the above odometer certification made by the seller/agent.	gnature)
- 1	Signature of Buyer/Agent Protect (A)the (Samura) of	
z	LIENHOLDER TO BE RECORDED AND SHOWN ON NEW TITLE	gnature)
LIEN	IST LIEN IN FAVOR OF (NAME & ADDRESS)	
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37) 3/L Quickest route from

Time 5 hrs 46 min. Distance 319 miles.

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	and the second s		+	· T	

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Licensed to Report Prepared By: Date of Computer Run

DETERMINE DRAG FACTOR USING A DRAG SLED

YOU CAN OBTAIN TWO DECELERATION FACTORS WITH THE DRAG SLED. THEY ARE:

- 1 THE STATIC FRICTION OF A SURFACE
- 2 THE DYNMATIC OR SLIDING FRICTION OF A SURFACE

THE STATIC FRICTION SHOULD BE USED IN CONTROLLED BRAKING SUCH AS ABS BRAKING SYSTEMS. THE SLIDING FRICTION SHOULD BE USED IN ALL OTHER CASES WHERE THE VEHICLE IS SLIDING.

WHAT IS THE WEIGHT OF THE DRAG SLED (W = pounds)? 52
WHAT IS THE PULL FORCE TO START SLIDE (PF = pounds)? 39
WHAT IS THE PULL FORCE WHILE SLIDING THE SLED (PF = pounds)? 39

THE STATIC DECELERATION FACTOR IS .75
THE SLIDING DECELERATION FACTOR IS .75

The formulas used for this calculation are:

f static = PULL WEIGHT AT START OF SLIDE / WEIGHT OF SLED f slide = PULL WEIGHT WHILE SLIDING / WEIGHT OF SLED

COMMENTS:

SLED PULLED IN SAME DIRECTION AS SKID.

Report Prepared By: Date of Computer Run:

NORMAL BRAKING

D = DISTANCE THE VEHICLE SLID WITH BRAKES LOCKED; WHICH IS THE AVERAGE OF THE MARKS.

Note: If you have no proof of brake failure treat the wheel as if it were skidding. With brake failure use 'PERCENTAGE BRAKING'.

F = DECELERATION FACTOR WHICH HAS BEEN OBTAINED FROM A VEHICLE TEST SKID OR DRAG SLED.

WHAT IS THE DECELERATION FACTOR (F)? .75
WHAT IS THE DISTANCE (D = feet)? 97.7

THE SKID SPEED IS 46.88 MILES PER HOUR, AND THE VELOCITY IS 68.72 FEET PER SECOND.

The formulas used for this calculation are:

S = SQUARE ROOT (30 * D * f) V = 1.466 * S

COMMENTS:

FOUR WHEEL SKID OF PLY. VAN PRIOP TO IMPACT.

COMBINING SPEEDS

THIS USES SPEEDS CALCULATED FROM OTHER SECTIONS OF THE MENU.

HOW MANY SPEEDS DO YOU WISH TO COMBINE? 2

FOR SPEED # 1 THE SPEED IS 46 FOR SPEED # 2 THE SPEED IS 50

THE COMBINED SPEED IS 67.94 MILES PER HOUR, AND THE VELOCITY IS 99.6 FEET PER SECOND.

The formulas used for this calculation are:

$$SC = SQUARE ROOT ((S1 * S1) + (S2 * S2) + + (Sn * Sn))$$

 $VC = 1.466 * SC$

COMMENTS:

THE TWO SPEEDS THAT WERE COMBINED WERE FIRST THE PLY VAN SKIDS PRIOR TO IMPACT AND THEN THE SPEED OF THE VAN AT IMPACT FROM CRUSH.

av

I		CONNECTING CA				CVet tit bui	RI NO	
	CASE REPORT	UCR ENTE	RY REQUIR	ED:	Yes X N	0 []	*****	v·- [-•]
	INCIDENT REPORT TOW REPORT	HOLD (ORDER:	YES	□ NC			
	CUSTODY REPORT AUTO THEFT/RECOVERY UNESTOCK THEFT/RECOVERY	ed or ordered held by a	or impounded vehicles - p station or any appointed c an officer of the Colorado	itate patrol with,	ut & release from an	officer		
DATI	OFFICER ASSAULTED THEFT REPORT	shell be punished as a	patrol or a hone lide cour provided in section 18.1-	order commits o	cless 3 misdemeer	nor and		
L	IIME 1972]						-
CO	DES DH=DHIVER; RO#REGISTERED OWNER; V=VICTIM; W	#WITNESS; LP=L	AST PERSON IN I	OSSESSIO	N. RP=REF	ORTING PAP	(I Y	S=SUSPECT
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z	☐ ARREST ☐ ABANDONED HAZARD			<u> </u>				
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NARRATIVE	Veh in the first this information is correct and true		(I V(LV)(L))	S JAITIND Y	RO lau	ADSIDE AU	THORI. accept le to rethis ve	ZATION responsibility for the above

NITIAL C FENSE REPORT

and EVIDENCE SUMMARY TO DISTRICT ATTORNEY

						-
•		NITIAL ACT	TION			
TATE AND TIME OF OFFENSE:			DATE-THIS R	EPORT		<u>:</u>
EPORTING AGENCY		'NVESTIG	ATING OFFIC	EŖ	·	
DEFENDANT IN CUSTODY?_						
E IN CUSTODY, HAS BAIL BEE	EN SET?		AMOUN	Γ	22.00	
AS DEFENDANT BEEN SERVE	ED WITH SU	MMONS & COMPLAINT?	No No			
request that the District Attorne	ey prepare	SUMMONS & C	OMPLAINT	☐ CRI	MINAL INFORM	MATION
ARREST WARRANT (statem	nent of facts	supporting must accomp	pany this repor	t)		
Other action requested from D.A.						
		DEEENDANT	(0)			
· ·		DEFENDANT	•			Prev.
NAME	DOB	ADDRESS	٠٠٠	TELE.	OCCUPATION	Offend?
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_		OFFENSE (S))	
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Vehicular Homicide		18-3-106(1)(b)				
ehicular Assault (3 coun		18-3-205(1)(b)				
Prove vehicle without val		-				
perated an uninsured mot	or vehicle	on a public roadwa	42-4-1213	(2)		
	PH'	YSICAL EVI	DENCE			
DESCRIPTION OF ITEM	VALU	JE RECOVERED	FROM	WHEN IN	PRESENT CUST	ODY OF
	7,	1,20072,1120				
				 	 	
						
E CICHATURE OF OFFICE			,	•	Name and Associated to the Control of the Control o	
SIGNATURE OF OFFICER	IU SIGN CC	MPLAINT				H

OFFENSE REPORT - FACE SHEET (1)

WITNESS DIGEST OF EVIDENCE

AGE & OCCUPATION BRIEF STATEMENT OF FACTS TO WHICH EACH WITNESS CAN TESTIFY

I investigated an accident on ll miles east involving a 1983 gray buick 4dr that was westbound and crossed the center line and struck an eastbound blue Plymouth Voyger van head-on. The point of impact was 16.3' south of the center line. The graw buick 4dr. was driven by A death resulted from the accident due to injuries sustained from the accident. Killed was 6 year old In addition to the death three members from the same van riding in the van sustained serious body injuries. Those sustaining serious bodily injuries were37 year old . 1 year old and 8 year old A beer bottle was found under the front seat of vehicle and a broken beer bottle was found behind the front seat of the same vehicle. was transported to the for treatment. While was in x-ray a nurse in the emergency room told an investigator with the that she smelled alcohol on she was working on him. A medicar cest performed in the emergency room showed that have some alcohol in his blood. The hospital result was 41(mg/dL). I requested two blood tests approximately one hour apart to determine what the alcohol content was at the time of the accident. als stated to trooper that told her that he had drank 2 beers after getting off work at

MEMORANDUM

DATE:

TO:

FROM:

SUBJECT:

MECHANICAL INSPECTION

ON APPROX 1500 HRS, I PREFORMED A MECHANICAL INSPECTION ON A 1994 PLYMOUTH VOYAGER, MILEAGE 9456, AT THE FOLLOWING:

TIRES: ALL FOUR TIRES ON THE VEHICLE WERE IN NEW CONDITION. THE LEFT FRONT TIRE HAD 43PSI, THE RIGHT FRONT TIRE WAS FLAT DUE TO ACCIDENT DAMAGE. THE RIGHT REAR TIRE HAD 45 PSI AND THE LEFT REAR TIRE HAD 43PSI.

ENGINE COMPARTMENT: BECAUSE OF THE AMOUNT OF DAMAGE, THE ONLY THING I COULD CHECK WAS THE STEERING GEAR BOX LINKAGE. THE DAMAGE MADE IT NON ACCESSIBLE TO CHECK THE FLUID LEVELS AND BELTS FOR SERVICEABLY. ALSO THE THROTTLE LINKAGE COULD NOT BE CHECKED.

SUSPENSION: THE REAR LEAF SPRINGS AND SHOCK ABSORBERS WERE INTACT AND OK.

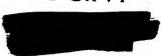
UNDERSIDE: THE EXHAUST SYSTEM WAS INTACT AND OK. THE BRAKE LINES TO THE REAR BRAKES WERE INTACT AND OK. THE VEHICLE TRANSAXLE AND MOTOR MOUNT WAS BROKEN ON THE RIGHT SIDE. THE EMERGENCY BRAKE CABLE WAS INTACT BUT NOT OPERATIONAL DUE TO ACCIDENT DAMAGE.

VEHICLE INTERIOR: BOTH LEFT AND RIGHT SEATBELTS WERE IN A SLACKED POSITION. THE LIGHT SWITCH WAS UNDETERMINED IN WHAT POSITION IT WAS IN DUE TO IT WAS A PUSH BUTTON STYLE. THE ACCELERATOR LINKAGE WAS BENT DUE TO ACCIDENT DAMAGE. THE STEREO WAS IN THE ON POSITION AND THERE WAS A TAPE IN THE TAPE PLAYER. THE CRUISE CONTROL SWITCH WAS UNDETERMINED IN WHAT POSITION IT WAS IN.

I FEEL THERE WAS NO MECHANICAL DEFECTS TO CONTRIBUTE TO THIS ACCIDENT. THERE WERE NO PHOTOGRAPHS TAKEN.

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MEMORANDUM



DATE:

TO:

FROM:

SUBJECT:

MECHANICAL INSPECTION

ON APPROX 0930 HRS, I PERFORMED A MECHANICAL INSPECTION ON A 1993 BUICK LE SABRE, YARD IN AND RECORDED THE FOLLOWING:

TIRES: ALL FOUR TIRES ON THE VEHICLE WERE IN NEW CONDITION. THE TIRE SIZE: P205/75/R15 GENERAL, (M&S). THE TIRE PRESSURE IN THE RIGHT REAR WAS 27PSI, THE OTHER THREE WERE FLAT. DUE TO ACCIDENT DAMAGE.

ENGINE COMPARTMENT: ALL THE DRIVE BELTS WERE IN SERVICEABLE CONDITION. THE ENGINE OIL LEVEL WAS IN OPERATING RANGE. THE TRANSMISSION OIL LEVEL COULD NOT BE CHECKED DUE TO ACCIDENT DAMAGE. THE ENGINE RADIATOR WAS EMPTY DUE TO ACCIDENT DAMAGE. THE BRAKE MASTER CYLINDER WAS INTACT AND THE FLUID LEVEL WAS IN THE OPERATING RANGE. THE THROTTLE LINKAGE AT THE CARBURETOR WAS INTACT AND OPERATIONAL. BOTH UPPER AND LOWER RADIATOR HOSES WERE INTACT.

BRAKES: THE REAR BRAKE SHOES WERE BONDED AND IN SERVICEABLE CONDITION. THE FRONT BRAKE PADS WERE IN SERVICEABLE CONDITION AND LOOKED NEW. THE REAR BRAKE DRUMS INTACT AND OK. THE FRONT CALIPERS AND ROTORS INTACT AND OK. THE BRAKE LINES TO THE FRONT CALIPERS WERE INTACT AND OK. THE BRAKE LINES TO THE REAR CYLINDERS WERE INTACT AND OK.

STEERING: THE STEERING WHEEL INSIDE THE VEHICLE WAS BENT DUE TO ACCIDENT DAMAGE. THE RIGHT TIE ROD END WAS BROKEN DUE TO ACCIDENT DAMAGE. THE IDLE ARM WAS INTACT BUT WAS NOT MOVEABLE DUE TO ACCIDENT DAMAGE. LINKAGE TO THE STEERING GEAR BOX WAS INTACT.

SUSPENSION: THE RIGHT REAR SPRING WAS BROKEN FROM THE MOUNT DUE TO AXLE DAMAGE. THE REAR SHOCKS WERE NEW AND ALSO BROKEN FROM MOUNTS. BOTH FRONT LEFT AND RIGHT BALL JOINTS INTACT.

UNDERSIDE: THE EXHAUST WAS INTACT AND BROKEN FROM THE MOUNTS. THE RIGHT FRONT MOTOR MOUNT WAS BROKEN. THE TRANSMISSION MOUNT WAS ALSO BROKEN AND THE TRANSMISSION WAS PUSHED BACK DUE TO ACCIDENT DAMAGE. THE REAR AXLE HOUSING WAS BROKEN ON THE RIGHT SIDE AND THE AXLE REMOVED DUE TO ACCIDENT DAMAGE. THE EMERGENCY BRAKE CABLE WAS INTACT AND OPERATIONAL.

VEHICLE INTERIOR: ODOMETER SHOWED: 55048 MILES: THE LIGHT SWITCH WAS IN THE OFF POSITION. THE LEFT SEATBELT WAS CUT AND THE RIGHT SEATBELT IN THE STOWED POSITION. THE ACCELERATOR LINKAGE WAS BENT DUE TO ACCIDENT DAMAGE. THE BRAKE PEDAL LINKAGE WAS INTACT. THE CRUISE CONTROL SWITCH WAS IN THE ON POSITION.

THERE WERE NO PICTURE TAKEN DURING THE INSPECTION. AND I FEEL THERE WERE NO MECHANICAL DEFECTS TO CONTRIBUTE TO THIS ACCIDENT.

_	-			DATE	ACC I DENT	LOCATION	ACCIDENT TO	TE EXAM		ON EXAM IT	IME/START/F
									1	,	1430 /1130
EHIC	LE MAKE	YEAR	MOD	EL BO	DY STYLE C	OLOR LICE	SE LIC STAT	TE LIC Y	₹		, , , , , , , , , , , , , , , , , , ,
D .,	. /.	83	15.50	see c	180 1	SEAY	<i>-1</i> 1 <i></i>	94		*	•
TIRE	SIZE	MAKE/ST	1200		1	WHEEL	DRUM/ROTOR	WHEEL	BRAKE	CALIPER	WHEEL/CYLIN
	P305/15/A	5 Genera	/ pe, /	New	 	OK	[New	OL	SPRINGS, ET
LF	1 1 1 1 1			· · · · · ·	flat	 	OL.	0/6		<u> </u>	
RF		General 11		NEW	F/At.	-AZ	- A/-		New	<u> </u>	- 1
RR	<u> </u>	Leneral M		New	271BS	0/C	01	OK	BONET OF	 	0.6
LR	11 11	Cerul 1	1113	New	1 FIM	1012	<u> </u>		80-13 de		<u> </u>
	LE INTE				TER 55048	OK NF AD	3 Best Acc	det Dam	COMMEN	ITS	
	EEDOMET	ER CH ON Ø		•	TER <u>53098</u> s no		4) LFT BEL	1 Cut /c	T BELF	In stous	Position
	EERING	_	<i>''</i>	12			,				
•	ATBELTS	- •				0 0 0 0 n br	Tresise min			1- 12-	2 7 (1)
	_	NS I DE L	EFT/	RIGHT	SIDE	00 <u>8</u>				Insil B	41. (HJ)
6. WI		ELERATO		NV			BRALE Pelle				
	-	ELERATO	H LI	HRAGE			5) cruse	Correl.	Switch I	von Positi	/F
						000	13				
ENGINE	COMPA	RIMENT					DBUTS IN	sone Com	dittor		
	_TS/PUL					OK NF AD			,	Ends due	To 0 A
		COMPONE			•	ooô					
	CK MOU	PONENTS NTS					TRUS Cal	no che	ck / Eng	in oil ok /	Winshell
5. но:						000 00 %	unsh Em	pty			
. FLU	ID FEA	ELS		Ŷ							
		USPENSI									
	•	CCELERA	TOR/	CLUTCH	/BRAKE						φ.
9. OTH	1E.R					000					
STEERI	NG.			· · · · · · · · · · · · · · · · · · ·			-1 24-	0			
		BOX/ARM				OK NF AD	2) RF IM				<u> </u>
	/RELAY	•					3) Ide stran	Intact	Butnot	Boxxle C	<u>4ò</u>
3. IDL	E ARM						Whinkens 7	2 steer 9	er Box	Intact A)	
4. OTH	ER							,			
											
SUSPEN	4S I ON					OK NE	1-in Twhole B	er dus To	Acciscof 3	Arrac	
		TS LEFT				OK NF AD	5-7 Intad/8				
		TS RIGH									
		TRUTS L.I Truts r				ثمه	8- Re Spea				
	CKS FR		i GH T	SIDE			() Ker >	chak In	1. (Ne	° W	
-	CKS RE					M C C M C M					
7. SPR	INGS F	RONT				$\mathbf{X} \square \mathbf{Z}$					
	INGS R					\square					
9. OTH	KER				 .						
:							1	., /			
UNDERS						OK NF AD	1 Brok inn	MIRKY		10.3	
1 EXH	IAUST VE SHAI	FT				\square \square \square	3 Pushe Bad	L- MOU	~ 820ks	- (K42)	
_	NSMISS						4 Brds How	ry or R	side Ak		
	R AXLE						() Intact olk	1			*
	KE LIN							. : 0)			
		BRAKE (CABLE	ES		XIOO	DRI had n	Mont Broke	u		
⁷ - мо т я отн	OR MOU!	NTS									

CASE SUMMARY

Case Number: _		-					
Date/Time of O	ffense		Location of	Offense	Date/Time	of Arr	est
In Custody	Warrant F Yes	Requested	Date Filed	Screening D.A.	Rejected	Acce	pted
		D	EFENDANT/S				
Name		D.O.B.		Address		Pho	ne
						home work	-
						home	
						work	
						home	
						work	
						home	
			<u> </u>			work	
	REQUESTED		OFFENSE	CHARGES F			
C.R.S. NUMBER	OF	FENSE	CLASS	C.R.S. NUMBER	OFFENSE	` 	CLAS
18-3-106(1)(b)	Vehicular	homicide	3F				
18-3-205(1)(b)	Vehicular	assault	(3 counts) 5	F			
42-2-101(1)	Drove veh	icle with	out valid dri	vers license. 2T			1
42-4-1213(2)	Operated	an unins	ured motor ve VICTIM/S	hicle on a public i	roadway M		
Name		D.O.B.		Address		Pho	ne
						hon	
	<u> </u>					work	
		ı				home	
			Same as above	ve		work	
			Same as above	ve		home work	-
⊳escribe Eviden	nce & Prop	erty Held:	Same as abou	ve .	In Possessi		
Analysis needed	l to be do	ne on evid	ence or photo	ographs:	Date phot	ographe	d and
				•	released:		
SYNOPSIS:							

Γ-			CONNLCTIN	G CASE NO				CASL	REPOR	NO	
- CASE REPORT			UCR ENTRY REQUIRED: Yes Q N				<u>10 □</u>	1		monal into in narrati	
	CUSTODY REPORT AU	W REPORT TO THEFT/RECOVERY FENSE REPORT EFT REPORT	24-33.5 213 Fee any gerage or se ad or ordered h	please of impounded enice station or any old by an officer of th state patrol or a box aid as provided in se	vehicles - 94 appointed cui e Colorado si la lide court	eledish who re late patrol will order commit	ner, eperator d pleases any veh hour a release f	amployee of icle impound- ion on officer			dar homicide dar assault
DATE	OFFICER ASSAULTED TIME	[ġam □ pm									***************************************
coc	DES DR=DRIVER; RO=REGISTERED	OWNER; V=VICTIM; W=V	WITNESS.								
\Box	CODE LAST NAME	FIRST				MI	1 001	3		(
CT 1	ADDRESS						57	D CAP -	1 -		_
SUBJECT	DRIVER'S LICENSE NUMBER AND TYPE None			SIATE	HACE	SEX M	wg1. 160	нст 1 5-6 1	brn	_	HOME TELEPHONE
St	EMPLOYER NAME EMPLOYER ADDRESS						OCCUPAT	ION			unknown
	CODE LAST NAME			МІ	DOI	3			SOCIAL SECURITY NO		
CT 2	ADDRESS					C	ITY				STATE ZIP CO
SUBJECT	DRIVER'S LICENSE NUMBER AND TYPE			STATE	RACE	SEX	WGT.	HGT.	HAIR	EYES	HOME TELEPHONE
Su	EMPLOYER NAME	EMPLOYER ADDR	RESS			l	OCCUPAT	ION			BUSINESS TELEPHONE
	LICENSE PLATE/TYPE	STATE		EHICLE YEAR			MAKE R	uick		TYP	E OR BODY STYLE
	COLOR (TOP/BULLOM)		1	/IN			<u> </u>	uick			
	Gry REASON TOWED:			INVENTORY OF VEHICLE TRUNK EXAMINED TYPES					D TYES TO NO		
_	☐ ARREST ☐ OTHER:			one beer bettle under seat one						seat one bro	
ō	CONDITION OF VEHICLE:			beer bottle behind front seat, misc. clothes.							
RMA	1-MINOR 2-MODERATE 3-EXTREME										
N. I	3 4 5 6 7 6			pair boots, one pair pants, one shirt, three							
EHICLE INFORMATION	2 17 14		tapes, one map on front seat.								
Ē	170			VALUE OF RECOVERED STEAL VALUE OF PROPERTY S							
	15 14 13 12 20 Undercorrage			OWNER NOTIFIED MAIL PERSON OTHER					DATE/TIME		
	TOW COMPANY NAME	AC	DAESS	U MAIL	JFERS	JN C3 1	JITEN.				PHONE
	SIGNATURE OF TOW OPERATOR VEG		HICLE REI (ASED TO			D	DATE/TIME			RELEASED BY	
\vdash	STATUTE NUMBER			CHARGE				YES	TANT	SUMMONS/WARE NUMBER	
s	18-3-106(1)(b)	Vehicular homicide				3F			Х	Direct filir	
CHARGE	18-3-205(1)(b)	New City Co. Co. Co. See			counts) 5F					х	Direct filir
G. H	42-2-101(1)	Drove vehicle without valid drivers li			licer	se 2T		Х	Direct Filir		
	42-4-1213(2)								1	х	Direct fil <u>i</u> :
-								M	Γ	L	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		Roadway						• /			
	ys • 10•										
IVE											
NARRATIV											
N A	,	•									
1	I AFFIRM THAT THIS INFORMATION IS CORRECT AND TRUE						ROA	ROADSIDE AUTHORIZATION			
							i auti	I authorize and accept responsibility for the captioned vehicle to remain where now par-			
	SIGNATURE OF REPORTING PARTY REVIEWED BY UNITIAL ST						unde	understand that this vehicle MUST be move 24 hours, or it may be towed at the coord			
			*					OPE	BATOR		
ь	WHITE-CASS FILL	GREEN DATA ENTRY/ENT	YI GOS	(MPI DIAL	tow ord	HATCH:	GGEDEN	ROD-VEHI	11.04	NELVI	9 114 'OF

2 OF 4

DAMAGE RESULTS: PLY

DATE: PROJECT: SPEED CHANGE FROM CRUSH CASE: PROBLEM TYPE: WEHICLE DESCRIPTION: van VEHICLE DATA ****************** 4 (INTERMEDIATE) STIFFNESS CATEGORY: 356 lb/in +/- 10% *STIFFNESS COEFFICIENTS: 34 lb/in^2 +/- 10% ********************* * WHEELBASE (in): COLLISION SURFACE: 1 (FRONT) 81.0 * * XF (in): 111.9 * 3300 * XR (in): WEIGHT (lb): 72.0 * RADIUS OF GYRATION (in^2): 3741 * YW (in): ********************* CRUSH DIMENSIONS (inches) ******************* TOTAL CRUSH WIDTH, L: 72.0 D: 0.0 * CRUSH OFFSET, 9.0 L1 =0.0 DIRECT PROFILE SPECIFIED? N C1 =18.0 L2 =14.4 C2 =L3 = 28.8 C3 = 34.0 42.0 L4 =43.2 C4 =L5 =C5 =52.0 57.6 FORCE LOCATION: 72.0 C6 =54.0 L6 = TOTAL CRUSH CENTROID **X**: 60.2 8.4 *********************** VEHICLE DAMAGE RESULTS ******************** +/-VALUE ERROR ******************* +/-0 10 PDOF (degrees) *************** 46.0 +/-2.0 EOUIVALENT BARRIER SPEED (mph) +/-10.5 8.4 MOMENT OFFSET (in) 9100 112600 +/-FORCE MAGNITUDE (1b) 2851000 +/-205000 COLLISION ENERGY (in-lb) 0.98 +/-0.05 MASS RATIO +/-0.00 FORCE MAGNIFICATION FACTOR 1.00 ************* CRUSH INTERACTION WITH BUICK ******************* * +/-SPEED CHANGE TOWARDS FORCE (mph) 50.5 2.9 126400 +/-17300 AVERAGE FORCE MAGNITUDE (1b) +/-2.00 ANGULAR SPEED CHANGE (r/s) 2.50 LINEAR IMPULSE (1b-s) 7590 +/-430 +/-RELATIVE APPROACH SPEED (mph) * 100.9 7.0

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DAMAGE RESULTS: BUICK **********
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3 OF 4

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PROJECT:
                                         DATE:
PROBLEM TYPE: SPEED CHANGE FROM CRUSH
                                         CASE:
VEHICLE DESCRIPTION:
                      VEHICLE DATA
   STIFFNESS CATEGORY:
                     5 (FULL SIZE)
   STIFFNESS COEFFICIENTS:
                        325 lb/in +/- 10%
                         37 lb/in^2 +/- 10%
                       *******************
   COLLISION SURFACE:
                     1 (FRONT)
                                * WHEELBASE (in):
                                                115.0 *
                                * XF (in):
                                                 98.1 *
  WEIGHT (lb):
                            3631 * XR (in):
                                                119.9 *
  RADIUS OF GYRATION (in^2): 4040 * YW (in):
************************
                 CRUSH DIMENSIONS (inches)
*********************************
  TOTAL CRUSH WIDTH,
                        76.0
                    L:
  CRUSH OFFSET,
                         0.0
    DIRECT PROFILE SPECIFIED? N
                                C1 =
                                     22.0
                                           L1 =
                                                 0.0
                                C2 =
                                     19.0
                                           L2 =
                                                15.2
                                C3 =
                                     30.0
                                           L3 =
                                                30.4
                                C4 =
                                     40.0
                                           L4 =
                                                45.6
  FORCE LOCATION:
                                C5 =
                                     57.0
                                           L5 =
                                                60.8
       TOTAL CRUSH CENTROID
                                C6 =
                                     67.0
                                           L6 =
                                                76.0
                    X:
                        75.8
                    Y:
                         8.9
                  VEHICLE DAMAGE RESULTS
******************************
                                         +/-
                                  VALUE
                                              ERROR
***********************************
  PDOF (degrees)
                                     20
                                              10
*************************************
  EQUIVALENT BARRIER SPEED (mph) *
                                   49.8
                                         +/-
                                              4.8
  MOMENT OFFSET (in)
                                   -17.6
                                         +/-
                                              13.0
  FORCE MAGNITUDE (1b)
                                  140200
                                         +/-
                                              14700
  COLLISION ENERGY (in-1b)
                                 3890000
                                         +/-
                                              630000
  MASS RATIO
                                   0.93
                                         +/-
                                              0.10
  FORCE MAGNIFICATION FACTOR
                                         +/-
                                   1.13
                                              0.14
               CRUSH INTERACTION WITH PLY
***********************
  SPEED CHANGE TOWARDS FORCE (mph)
                                          +/-
                                    45.9
                                               2.6
  AVERAGE FORCE MAGNITUDE (1b)
                                  126400
                                          +/-
                                               17300
  ANGULAR SPEED CHANGE (r/s)
                               *
                                   -3.52
                                          +/-
                                               2.60
  LINEAR IMPULSE (1b-s)
                                    7590
                                          +/-
                                               430
  RELATIVE APPROACH SPEED (mph)
                            *
                                   100.9
                                          +/-
                                               7.0
```

WARNING MESSAGES ***********

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4 OF 4

PROJECT: PROBLEM TYPE: SPEED CHANGE FROM CRUSH	DATE: CASE:
************** VEHICLE ONE: PLY * * * * * * * * * * *	******** * * * *
* There were no program errors or warnings * * * * * * * * * * * * *	
*************	**********
**************** VEHICLE TWO: BUICK ** * * * * There were no program errors or warnings * * *	*************** * * * * flagged. * *
* *	*
* * * * * * * * * * * * * * * * * * *	************
*********** CASE WARNINGS: * * * * * * * * *	********** * * * * * *
* There were no program errors or warnings *	

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	•	The second secon	CONNECTING CASE NO	CASE UN	PLAGI VIV					
'		CASE REPORT	UCR ENTRY REQUIRED: Yes	l □ No □ I ⁿ	NO HEASON HELD ladditional into in narratives					
	1	INCIDENT REPORT CUSTODY REPORT LIVESTOCK THEFT/RECOVERY CSTOCK TOWN REPORT D AUTO THEFT/RECOVERY OFFENSE REPORT	HOLD ORDER: YES 24-333-213 Release of impounded vehicles - penally Any owner, operation any servinger or service station or any appointed estandam who releases any- ed or ordered held by an officer of the Closedo state patrol without a release of the Colorado state patrol or a bone tide count order cummits a class 3 or shall be openshed as provided in asscring in 11 106. CRIS	NO D						
1	.,,,,,	Gah □ PM								
	со		WITNESS: LP=LAST PERSON IN POSSESSION: R	P=REPORTING	PARTY S=SUSPECT					
	_	CODE			SOCIAL SECURITY NO					
	ECT .	ADDRES			BIRTH (CITY, STATE)					
1	8	DRIVER'ST	TOPHIL HACE SEX WGT.							
	S	EMPLOYER NAME EMPLOYER ADD	MESU MA W MA JOO		HOME TELEPHONE					
			OCCUPA	ATION	BUSINESS TELEPHONE					
	8			В	SOCIAL SECURITY NO					
	ECT				- STATE ZIP CODE					
	SUBJEC	DRIVER'S LICENSE NUMBER AND TYPE	STATE RACE SEX WGT.	HGT. HAIR	EYES HOME TELEPHONE					
.	S	EMPLOYER NAME EMPLOYER ADDR	RESS OCCUPA	TION	BUSINESS TELEPHONE					
		LICENSE DI ATENDE	VEHICLE YEAR MAKE	7)						
	ł	COLOR (TOP/BUTTOP)	VIN 5,2	27	TYPE OR PODY TYLE					
		REASON TOWED:								
	İ	O ACCIDENT OTHER:	INVENTORY OF VEHICLE	TRUNK	EXAMINED TYES TO NO					
	Z O	☐ ABANDONED HAZARD	LIST OF BROBERTY / DELICE							
	EMICLE INFORMATION	CONDITION OF VEHICLE:	16 and PENIA	LIST OF PROPERTY / PENTAL CAMERA						
	OR	1-MINOR 2-MODERATE 3-EXTREME	Came By, Bu	I GAME By, I BUE SUIT CASE MISC						
	Ž	3.3	CCOTHING, IBC	CLOTHING, I BUE SUT CASE MISC CLOTHING, IBLUE BAB WITH KIDS TOY I BUE SUT CASE MEE CLOTHING,						
1	2	33 3	- Bue SUT CASE							
	Y L	10	LIXAR BAG MISC CLOTHING							
		3 14 13 12 20 Undercarriage	S OWNER NOTIFIED		S YALUE OF PROPERTY					
	-	OW COMPANY NAME	☐ MAIL ☐ PERSON ☐ OTHER.		DATE/TIME					
ıL.			RESS		PHONE					
		VEH	IIGLE HELEASED 10	TE/TIME	RELEASED BY					
		STATUTE NUMBER	CHARGE .	WAR	RANT SUMMONS/WARRANT					
ي ا ا	, [YES	NO NUMBER					
ACR.			week a second control of the second control							
CHARG			···· · · · · · · · · · · · · · · · · ·							
	1		* - *****							
-	+									
		3 Blue DUFFR ROYS M	OS COTHULS I FLOR	201 (2)	or -d					
		3 Blue DUFFR BASS MSC CLOTHING, I FLORAL BAG WITH PUMO-AIDE & CLOTHING, I BLUE BAS WITH CAMPRA								
۱		PUMO-AINE & CLOTHINGS, I BLUE BAS WITH CAMPRA								
NARRATIVE		THE BACK BAS WITH TOPS, I PAPER BAG								
ARA		GOLGRING BOOK, & BAPE BAS WITH TOYS, I PAPER BAG WITH FOOD, #1 & CASH, I COURL WITH DRINGS (DOD) MISC								
Ž		CLOTHING of TOUS ALL DROPERTY GIVEN TO								
	-									
I AFFIRM THAT THIS INFORMATION IS CORRECT AND TRUE				ROADSIDE AUTHORIZATION						
_	Sid	GNATURE OF REPORTING PARTY		I authorize ar	authorize and accept responsibility for the above					
		-	REVIEWED BY (INITIALS)	captioned vel understand th	hicle to remain where now parked, and nat this vehicle MUST he moved within it may be towed at the owner's expense.					
CIRL DATOID										
:SP 6	SP 80 (REV 9/90) VEHICLE OWNER CONTROL PROFILE PROFILE OWNER CONTROL OF THE CONT									